Annual Report
1982/83

Alberta
HOSPITALS AND MEDICAL CARE

November 1984

Hon. Gerald J. Amerongen
Office of the Speaker
Legislative Assembly of Alberta

Sir:

I have the honour to present the fifth Annual Report of the Department of Hospitals and Medical Care, covering the fiscal year ended March 31, 1983.

Respectfully submitted,

David J. Russell
Minister
Hospitals and Medical Care

November 1984

Hon. David J. Russell
Minister of Hospitals and Medical Care
420 Legislative Building
Edmonton, Alberta

Sir:

I have the honour to present the fifth Annual Report of the Department of Hospitals and Medical Care. This information covers the fiscal year ended March 31, 1983.

Further financial information and statistical data concerning the operations of the Health Care Insurance Division can be found in the Alberta Health Care Insurance Plan Annual Report, which is published separately.

Respectfully submitted,

L. C. Grisdale, M.D.
Deputy Minister
Hospitals and Medical Care

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HIGHLIGHTS

- During the 1982/83 fiscal year the department's total expenditure on health care and hospitals was $2.142 billion as follows:

	1982/83
Health Care Insurance	$ 573,789,871*
Financial Assistance for Active Care	1,105,102,720
Financial Assistance for Long-Term Chronic Care	128,003,807
Financial Assistance for Supervised Personal Care	85,648,505
Financial Assistance for Capital Construction	216,271,252
Departmental Support Services	33,527,441
TOTAL	$2,142,343,596

(* This figure represents the gross expenditure of the Alberta Health Care Insurance Plan, not the excess of expenditure over revenue which appears in Statement A.)

- The overall expenditure per capita for hospitals and medical care was $869.37, a 34.0 percent increase from the previous years' $648.97.
- Approved capital funding for hospitals and nursing homes (including Alberta Heritage Savings Trust Fund projects) in the planning phase or under construction totalled an estimated value in excess of $2.2 billion. Of this multi-year program commitment, $652.0 million had been advanced by March 31, 1983, representing 29.5 per cent of the total.
- Expenditure for Basic Health Services under the Alberta Health Care Insurance Plan totalled $483.4 million, a 27.1 per cent increase from the $380.3 million in the previous year. The plan's average expenditure of fee-for-service benefits for Basic Health Services increased 25.0 per cent to $196.16 per person.
- Expenditure totalled $22.0 million for the Extended Health Benefits Program, under which a registrant or spouse aged 65 years or older, and their dependants, are entitled to receive certain dental and optical benefits. This represented an increase of 25.5 per cent from $17.5 million of expenditure made under the program the previous year. The average cost per person was $105.05.
- The number of persons covered under the Alberta Health Care Insurance Plan increased 1.7 per cent to 2,464,253 and the number of registrations increased 0.9 per cent to 1,126,539.
- During the year, 24,927,000 claim records were received by the Alberta Health Care Insurance Plan representing an increase of 16.9 per cent over the previous year. An average of 100,000 claim records per working day were received, compared to 86,000 in the previous year. The claim records received cover services provided under Basic Health Services, Extended Health Benefits and Out-of-Province Hospital Benefits (excluding in-patient claims received under the Reciprocal Billing Agreements with other provinces effective October 1, 1981), as well as practitioner services payable on behalf of the Workers' Compensation Board (effective January 1, 1982).
- The number of registrations under Alberta Blue Cross Non-Group coverage increased 2.1 per cent to 233,362 and the number of persons covered grew 1.8 per cent to 437,681.

- The department was responsible for the expenditure of $2,437,312 for air medical evacuation provided for patients through the Emergency Air Ambulance Service. The average cost for the 2,027 patients was $1,202.42 per trip.
- During the year the administration of sections of the Mental Health Act related to care and treatment of non-voluntary patients, as well as financial responsibilities related to Alberta Hospital Edmonton and Alberta Hospital Ponoka, was transferred from the Minister of Social Services and Community Health to the Minister of Hospitals and Medical Care.

LEGISLATION

Changes to the Acts

- Alberta Health Care Insurance Act

The Workers' Compensation Amendment Act, 1981 and its consequential amendment to the Alberta Health Care Insurance Act effective January 1, 1982, transferred from the Workers' Compensation Board to the Health Care Insurance Fund the responsibility for paying benefits for Basic Health Services provided to injured workers coming under the Workers' Compensation Act.

Subsequent to March 31, 1983, the Alberta Health Care Insurance Act and the Workers' Compensation Act were amended by the Health Care Statutes Amendment Act, 1983, assented to June 6, 1983, retroactive to January 1, 1982, to authorize the use of the Health Care Insurance Fund for the payments made on behalf of and recoverable from the Workers' Compensation Board.

- Mental Health Act

An order pursuant to sections 2 and 3 of the Public Service Administrative Transfers Act transferred, from the Minister of Social Services and Community Health to the Minister of Hospitals and Medical Care, the administration of the two mental health hospitals, effective December 23, 1982.

- Alberta Heritage Foundation for Medical Research Act

An order pursuant to section 2 of the Public Service Administrative Transfers Act transferred the administration of the above named Act from the Premier to the Minister of Hospitals and Medical Care, effective January 12, 1983.

Changes to Regulations

- Operation of Approved Hospitals Regulations

Section 28 was amended to include, in the case of hospital based nursing diploma programs before commencing new programs or making major changes to or terminating existing education and training programs, the approval of the Minister of Advanced Education and Manpower must be obtained as well as that of the Minister of Hospitals and Medical Care.

- Alberta Hospitalization Benefits Regulations

Section 9(1)(e) was amended to increase the rate for patient stay in an auxiliary hospital after 120 days from $7 to $8 effective April 1, 1982. Section 9(5)(b) was also amended to increase the rate which an auxiliary hospital may charge for private ward accommodation over and above the standard ward charge from $3.50 to $4.50 effective April 1, 1982.

Sections 23 and 28(c) were amended to provide authority for the Minister to construct health service clinics in isolated areas of the province and to clarify the authority for construction of staff residences and parkades.

Section 20(2)(b) was amended to increase the determining rate for payment of out-patient services charged by hospitals outside Canada, from $25 to $50, effective January 1, 1983. Payment in full is made for charges under $50, and charges over $50 are reimbursed up to a maximum of the Alberta rate payable for the same service.

- Nursing Homes Regulations

Section 12 was amended effective April 1, 1982, to increase the rates payable to operators of contract nursing homes, except those owned by district boards, by $3.80 per day for nursing homes of 50 beds or less and $3.70 per day for those with 51 beds or more. The daily rates during the periods of extended absence were increased by $3.75.

Effective October 1, 1982, further increases, including daily rates during periods of extended absence, of $2.95 per day for nursing homes of 50 beds or less, $2.25 for nursing homes of 51 to 100 beds, and $1.75 for nursing homes of 101 beds or more, except those owned by district boards, were effected.

Pursuant to section 6 of the Nursing Homes Act, effective April 1, 1982, the rates payable for district nursing homes in Group I increased by $3.65 per day and in Group II by $3.80 per day. The daily rates during periods of extended absence were increased by $3.75.

Effective October 1, 1982, district nursing homes rates were adjusted according to the number of beds. For nursing homes of 75 beds and under the daily rate and the rate for extended absence were increased by $2.25, and for nursing homes of over 75 beds the daily rate and the rate for extended absence were increased by $1.75.

Section 12.1 was amended to increase the rate that an operator of a contract nursing home may charge to eligible patients, effective May 1, 1982, for:

standard ward accommodation from $7 to $8;
semi-private room accommodation from $9.25 to $10.50;
private room accommodation from $12.50 to $14.25.

- Health Insurance Premiums Regulation

Effective July 1, 1982, the premiums for Alberta Blue Cross Plan Non-Group Membership were increased in accordance with arrangements made with the Alberta Blue Cross Plan consequential to the increase in their Group premium rates.

- Alberta Health Care Insurance Regulation

Amendments were made to authorize the use of the Health Care Insurance Fund for recoverable payments under reciprocal billing arrangements with the other provinces.

- Claims for Benefits Regulation

Effective January 1, 1983, section 7 was amended to establish a determining value of $50 when reviewing out of province claims for reimbursement.

PLANS ADMINISTERED BY THE DEPARTMENT

The Alberta Health Care Insurance Plan

The Alberta Health Care Insurance Plan operates under the authority of The Alberta Health Care Insurance Act and The Health Insurance Premiums Act. Residents registered under the Plan are entitled to specified benefits for Basic Health Services at approved rates. These benefits include:

- medically required services of general practitioners and specialists;
- specified oral surgical procedures carried out by dental surgeons;
- optometric services limited to one eye examination including refraction and the writing of a prescription for the fitting of glasses in each benefit period* and limited to a maximum of $23.75 (effective January 1, 1983). Benefits for more than one eye examination may be paid in each benefit period if the optometrist of the person satisfies the Minister in writing that more than one assessment is required. The Plan does not pay for the fitting or cost of glasses.
- chiropractic services to a maximum of $11.50 for each visit with a limit during each benefit period* of $192.00 for single residents and $384.00 for those with one or more dependants. This coverage includes $19.00 for X-rays for each particular disability (effective January 1, 1983).
- approved podiatric services and appliances. There is a limit during each benefit period* of $192.00 for single residents and $384.00 for those with one or more dependants (effective January 1, 1983).
- physiotherapy services to a daily maximum of $18.70 per person, with a limit during each benefit period* of $192.00 for single residents and $384.00 for those with one or more dependants. These limits are waived for cases which are considered a continuation of inpatient hospital care under the joint referral of the attending physician and hospital physiotherapy department, and for registrants aged 65 years and older, their spouses and dependants.

*A benefit period consists of 12 months beginning the first of each July and running until the end of the following June.

The Plan also provides Alberta Blue Cross Non-Group Membership at no cost to registered residents aged 65 and older, and their dependants. Non-Group Membership is also available at reduced premium rates to other registered residents unable to obtain similar coverage through employment. Alberta Blue Cross, operated by the Alberta Hospital Association, is reimbursed by the Plan for the claims expenditures and for the associated administrative costs.

Monthly premiums* for Alberta Health Care Insurance were:

Regular premium rates	
Single	$ 9.50
Family	19.00
Registrant or spouse aged 65 and older	
Single or family	nil
Reduced premium rates	
Single, taxable income more than $3,000 but not more than $4,000	4.85
Family, taxable income more than $4,000 but not more than $5,000**	9.70
Single, taxable income not more than $3,000	nil
Family, taxable income not more than $4,000**	nil
Social allowance recipients	nil
Waiver of premium (due to financial hardship)	nil

Monthly premiums* for non-group membership through Alberta Blue Cross were:

Regular premium rates	
Single	$ 3.80
Family	7.60
Registrant or spouse aged 65 and older	
Single or family	nil
Reduced premium rates	
Single, taxable income not more than $4,000	2.70
Family, taxable income not more than $5,000**	5.40

* Premium rates for A.H.C.I.P. became effective July 1, 1981. The premium rates for Alberta Blue Cross Non-Group Membership became effective July 1, 1982.

** For family registration, taxable incomes of husband and wife are combined.

The Extended Health Benefits Program, operated by the Plan, provides additional benefits for optical and dental goods and services to registered residents aged 65 and older, and their dependants, without payment of a premium.

The Alberta Health Care Insurance Plan makes payments for medical and hospital claims on behalf of the Workers' Compensation Board.

The Plan provides benefits at Alberta rates for health services received outside Alberta. Under the Emergency Financial Assistance Program, a registered resident could apply through the Plan for special consideration to help pay for health and hospital services received outside Alberta when costs exceeded the benefits payable under the Plan. This program applies where the required services are not available in Alberta and the resident is referred by an Alberta physician, or where a resident while temporarily absent from Alberta requires the services because of an emergency which could not reasonably have been foreseen or guarded against. The program applies only if the excess cost placed an undue financial burden on the resident.

The Alberta Hospitalization Benefits Plan

The Alberta Hospitalization Benefits Plan operates under the authority of The Alberta Hospitals Act. It provides for in-patient hospitalization services at standard ward level and out-patient services in approved facilities to residents of Alberta registered under the Alberta Health Care Insurance Plan. These services are provided anywhere in Canada.

In Alberta, a $5.00 charge was levied upon admission to a general hospital, except for those exempt under legislation. A co-insurance charge of $8.00 (April 1, 1982) a day was made when a stay in an auxiliary hospital exceeded 120 days.

Outside Canada, hospitalization benefits are provided to a maximum of $150.00 per patient day. Under special circumstances, residents are eligible for additional assistance through the Emergency Financial Assistance Program.

The Alberta Nursing Home Plan

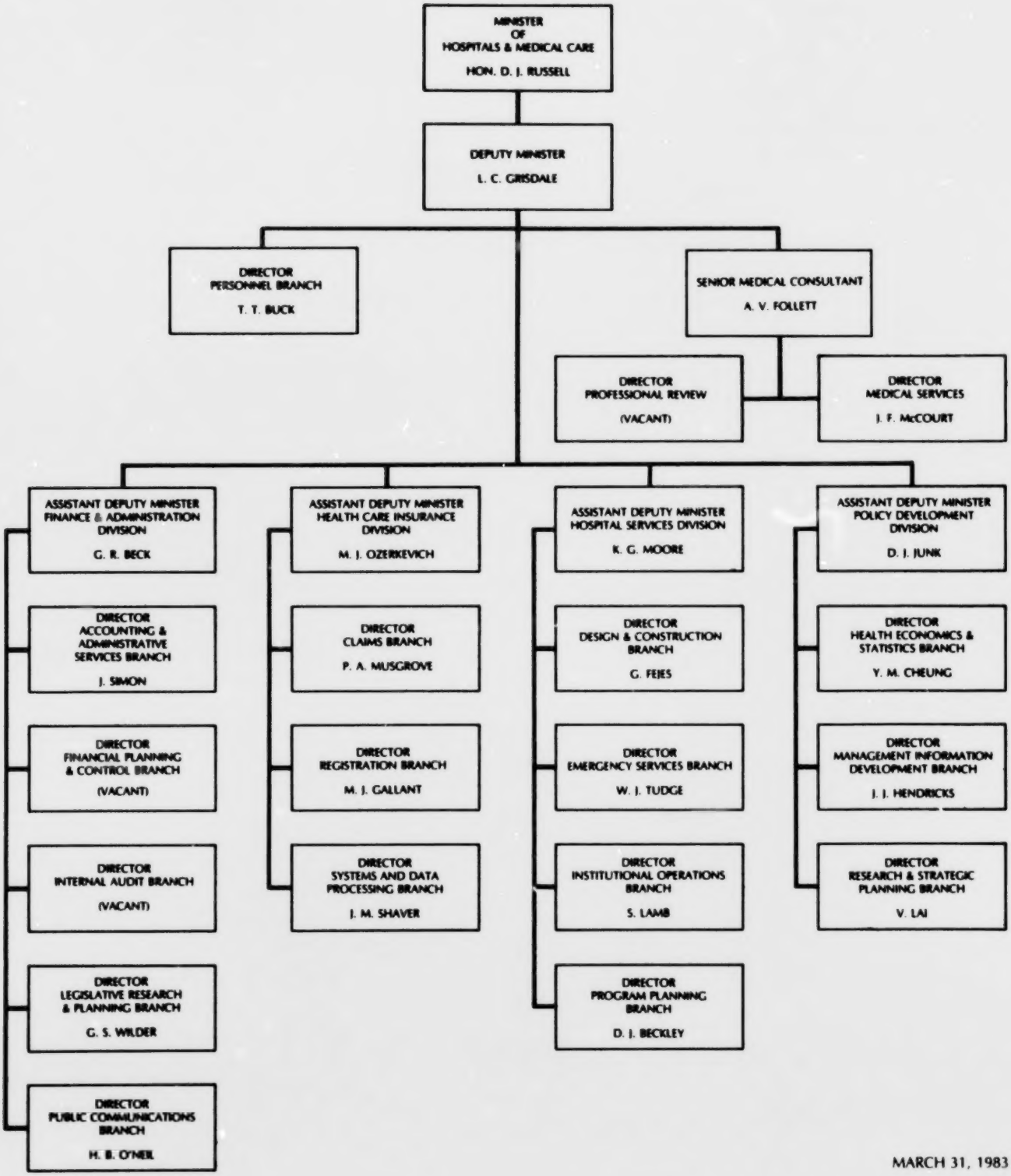
The Alberta Nursing Home Plan operates under the authority of The Nursing Homes Act. The Act provides for the establishment and incorporation of nursing home districts and gives the Minister of Hospitals and Medical Care the authority to enter into contracts with district boards or proprietary agencies to provide nursing home care under the provisions of the Act.

The Alberta Nursing Home Plan offers assistance to Alberta residents who are not well enough to be accommodated in private homes or facilities such as senior citizens' lodges, but not ill enough to require care in an active treatment or auxiliary hospital. Under the Plan, a subsidy is provided for each eligible patient receiving care in a contract nursing home in Alberta.

Each patient is required to pay a daily rate set out in the regulations governing contract nursing homes. The daily rates that nursing home operators can charge directly to eligible patients stood at $8.00, $10.50 and $14.25 (May 1, 1982) respectively for standard ward, semi-private and private accommodations.

ORGANIZATION

ORGANIZATION CHART



MARCH 31, 1983

SENIOR MEDICAL CONSULTANT

The Senior Medical Consultant provides advice for the planning, delivery and economics of insured services programs in all aspects of health care, and reports directly to the Deputy Minister. He is also responsible for administration of the Professional Services section.

In carrying out these duties during 1982/83, the Senior Medical Consultant:

- maintained liaison between the department and individual health care practitioners as well as their professional associations;
- was responsible for the Professional Review program including the monitoring of claims submitted by health care practitioners and the initiation of appropriate action when necessary;
- reviewed existing contractual agreements and developed new arrangements under the sessional payments program. During the reporting year a total of $1,829,356 was provided for the program through the Alberta Health Care Insurance Plan.

Funding of the Graduate Medical Education program is another major responsibility of the Senior Medical Consultant. The program was reviewed in collaboration with the major teaching hospitals in Alberta and the funding, provided by the department, was adjusted. As a result of the discussions the number of funded positions for interns and residents in Alberta teaching hospitals was increased to 634. Geographic appointees under the program continue to be funded on a shared basis between both Faculties of Medicine (University of Alberta and University of Calgary) and the Department.

The Senior Medical Consultant served as chairman of the Emergency Financial Assistance Committee. Under this program insured Alberta residents may request financial assistance when insured medical and hospital services are required outside the province and costs exceed benefits payble under the Alberta Health Care Insurance Plan, resulting in undue financial hardship. The committee examined all requests individually, taking into consideration all available information before each application was decided upon. During the 1982/83 fiscal year, 82 requests for emergency financial assistance were received. A table showing the number of applications considered during the last three years follows.

EMERGENCY FINANCIAL ASSISTANCE PROGRAM
Applications Reviewed
For the years ended March 31

	Applications			Approved			Refused		
	1981	1982	1983	1981	1982	1983	1981	1982	1983
Required Services Not Available In Alberta	67	61	63	60	49	47	7	12	16
Emergency Services	30	16	19	26	15	13	4	1	6
TOTAL	97	77	82	86	64	60	11	13	22

	Amount Paid					
	Medical Services			Hospital Services		
	1981	1982	1983	1981	1982	1983
Required Services Not Available In Alberta	$147,060	$127,566	$131,018	$283,511	$344,088	$433,025
Emergency Services	23,724	13,130	27,453	104,568	46,866	147,198
Total	$170,784	$140,696	$158,471	$388,079	$390,954	$580,223

The gathering of statistics with regard to anaesthetic and operative deaths was continued during the 1982/83 fiscal year. Reports were received from active treatment hospitals throughout the province and forwarded to the Alberta Medical Association for review.

Medical Services

The Director of Medical Services reports to the Senior Medical Consultant and his major responsibilities include:

- administering the Statement of Benefits program,
- reviewing complex claims and advising in regard to payment,
- developing and updating claims assessment policies to ensure appropriate and consistent payment of benefits to health care practitioners,
- developing and programming in-service education for claims assessment staff,
- representing the department at meetings of various assessment advisory committees.

Since the position of the Director of Professional Review remained vacant during the 1982/83 fiscal year, the major responsibility pertaining to regular review with regard to billing patterns of health care practitioners in Alberta was carried out by the Director of Medical Services.

The Benefits Unit is responsible for investigating and answering inquiries arising from the Statement of Benefits Paid, which is sent periodically to all residents of Alberta. Statements list all Alberta Health Care Insurance Plan payments for basic health services. During the 1982 calendar year, 4,536 enquiries were received of which 3,630 dealt with claim problems requiring research and in some cases adjustments within the Unit.

PERSONNEL

Major functions of this branch are:

- selection and recruitment of staff for permanent, part-time and wage positions;
- establishment and classification of new positions and reclassifications of existing positions;
- administration of special placement programs such as STEP, PEP, WEP;
- administration of employee salary and benefits program;
- providing advice and interpretation in application of master and divisional contracts and personnel regulations;
- providing advice on labor relations;
- administration of a department staff development and training program;
- providing advice on management and employee performance evaluation;
- administration of the management by objectives program;
- participation in occupational health and safety programs.

FINANCE AND ADMINISTRATION DIVISION

The Finance and Administration Division is responsible for the department's financial management and administrative services. This includes overall financial planning in line with current government policies for health programs, the development of operating and capital budgets, the coordination of legislative and regulatory changes, and effectively ensuring that the department's financial commitments are accomplished in a competent and decisive manner in accordance with sound financial management and internal control.

As well, this Division provided supportive financial information services, administrative support and facilities management for the department.

Accounting and Administrative Services

The major responsibilities of the branch are as follows:

- processing of payments to general hospitals, auxiliary hospitals and nursing homes;
- processing of payments for departmental support services and for Health Care Insurance benefits;
- collection and refund of Health Care Insurance premiums;
- establishment and maintenance of accounting records and procedures;
- preparation and monitoring of the departmental support service;
- preparation and monitoring of capital projects status reports;
- procurement of accommodation, supplies, equipment and furnishings;
- provisions of office support and record management services to the department.

Financial Planning and Control

The major responsibilities of the branch are:

- development and preparation of the Department's operating, capital and Heritage Savings Trust Fund budgets;
- exercising control over expenditures within approved levels of funding and within Legislative and Departmental policy constraints;
- provision of monthly financial information reports to senior management;
- provision of financial planning and advisory services to the Department;
- provision of financial analysis documentation and other supporting information related to local requisitioning, non-eligible hospital in-patient charges, equity interest payments and establishment of nursing home per diem rates.

Internal Audit

This branch is responsible for providing financial audit services to the department. During the reporting period the branch maintained an internal audit system which reviewed expenditures under the Health Care Insurance Plan, the Hospitalization Benefits Plan and the Nursing Home Plan. Special investigations were undertaken as necessary.

The branch also conducted various construction audits for new hospital projects.

Legislative Research and Planning

This branch is responsible for legislative planning for the Department.

Legal opinions and interpretations were obtained on a variety of matters under the Department's responsibility. The preparation and control of agreements and contracts involving the Department continued during the year.

Other activities of the branch included:

- preparation of a number of items of legislation, including 21 regulations for government consideration;
- preparation and processing of 55 Ministerial Orders to change hospital district boundaries and to establish or disestablish district boards.

Changes to hospital district organization and legal descriptions of hospital and nursing home districts in the province continued throughout the year. Reviews of district organization and the examination of the descriptions of hospital districts progressed with the development of a uniform system of description for hospital boundaries and a proper hospital district organization as necessary.

Public Communications

The major thrust of the Branch during the year was increasing the awareness of the policies, programs and operation of the Department, both internally and externally.

Among the projects carried out in pursuit of this mandate were:

- A radio and newspaper campaign to inform the public about the entitlement to reduction of Health Care Insurance Plan premiums for limited income families and individuals.
- Production and distribution of a condensed Department directory for health care professionals, hospital staff, and other specific publics.
- Relations with the information media. Approximately 250 contacts were made during the reporting period.
- Consultations with all levels of staff on public relations as it related to individual projects.
- Liaison with the Employee Management Advisory Committee in order to combine its internal newsletter with one produced by the Branch.
- Working with the Senior Citizens Bureau so that its 'Programs for Senior Citizens' could be sent to all AHCIP registrants on their 65th birthday. The booklet includes information on all Government programs for seniors including the health care area.
- Organized the Department's first information exhibit at the Alberta Hospital Association's annual convention.

Professional staff for this Branch are seconded from the Public Affairs Bureau on a full-time basis.

HEALTH CARE INSURANCE DIVISION

The Health Care Insurance Division is responsible for the delivery of provincial health care insurance programs, including registration of residents, premium billing, administration of Non-Group Alberta Blue Cross registration, administration of Workers' Compensation Board claims submission, and assessment and payment of claims. The division also provides systems support to the department in the areas of computer, administrative and micrographic services.

Claims

The major functions of the Claims Branch are:

- providing a system for the assessment and payment of claims;
- providing an information service to health practitioners;
- maintaining a registry of health professionals which includes general medical, specialist medical, chiropractors, dentists, optometrists, podiatrists, osteopaths, denturists, opthalmic dispensers and physiotherapists.

During 1982/83, the Claims Branch processed:

- 24,718,989 services with a value of $472,466,650 submitted for Basic Health Services;
- 514,176 services with a value of $21,774,069 submitted for dental and optical benefits under the Extended Health Benefits Program;
- 60 applications approved with a value of $580,223 paid under the Emergency Financial Assistance Program;
- 113,364 claims with a value to $15,108,892 submitted for insured hospital services obtained outside Alberta. These figures reflect the new procedure for processing claims;
- 635,066 services with a value of $9,425,017 submitted for Workers' Compensation Board* claims.

  *Responsibility for payment of Basic Health Services benefits for injured workers coming under the Workers' Compensation Act was transferred as of January 1, 1982 to the Alberta Health Care Insurance Plan. The above figures reflect the first complete fiscal year of processing W.C.B. claims.

Effective April 1, 1982 - March 31, 1983, 5,188 health professionals were recorded with the Alberta Health Care Insurance Plan. During the reporting year, 543 new practitioners were registered and 250 deleted from the registry.

Registration

The registration of all residents of Alberta and the maintenance of up-to-date registration records are primary functions of this branch.

During the fiscal year, approximately 4,800,000 adjustments were made to the registration records and 105,400 new registrations were created. The number of persons covered by the Plan increased by 1.7 per cent. This is down from the 5.1 per cent increase recorded for 1981/82, reflecting the levelling off of the rapid population growth experienced by the province over recent years.

Incoming and outgoing correspondence averaged 58,000 per month and over-the-counter responses numbered almost 46,000 for the year. Telephone enquiry service continued to improve as staff handled a record of 280,000 calls over the year. This represents a 19.0 per cent increase in service over the previous year.

Systems and Data Processing

This branch provides systems and data processing services to the department. The major functions of the branch are as follows:

- plan, develop and maintain computer and administrative and micrographic systems used by the department;
- provide data processing operations, including data conversion, data control and computer processing, and monitor computer processing performance;
- provide consulting services for hardware and software;
- provide liaison with the Information Services Division, Alberta Government Services;
- provide micrographic systems and service.

HOSPITAL SERVICES DIVISION

The Hospital Services Division coordinates the funding for planning, construction and operation of all active treatment, mental health and auxiliary hospitals. It also provides operating funds for all nursing homes in the province and for the Air Ambulance Program. The planning, building and operation of these institutions are monitored to determine compliance with legislation and to ensure the effective expenditure of funds.

Design and Construction

The major functions of the branch are:

- coordinating the department's capital construction program, including advising hospital and nursing home boards in planning for capital projects;
- assisting health care facilities in upgrading to current building and fire code standards;
- upgrading space and cost guidelines for Alberta's health care facilities.

Under the supervision of this branch, architectural and engineering design work was performed for hospital projects at:

Barrhead Nursing Home
Mineral Springs Hospital (Banff)
Bow Island General Hospital
Calgary General Hospital
Salvation Army Grace Hospital (Calgary)
Claresholm General Hospital
John Neil Hospital (Cold Lake)
Misericordia Hospital (Edmonton)
Macleod Municipal Hospital (Fort MacLeod)
Calgary Auxiliary District #7 Office Building.
Lethbridge Regional Hospital
Olds Municipal Hospital
Big Country Hospital (Oyen)
Ponoka General Hospital
Taber General Hospital
Tofield Municipal Hospital
George McDougall Memorial Hospital (Smoky Lake)
St. Therese General Hospital (St. Paul)
St. Mary's Hospital (Trochu)

Construction work was carried out at expandable prototypical hospital projects for Canmore, Coronation, Consort, Devon, Didsbury, Hardisty, Oilfields General (Black Diamond), Raymond, Three Hills and Vulcan hospitals.

Construction work was carried out at capital projects for:

Athabasca Municipal Hospital
Calgary General Hospital
Colonel Becher Hospital (Calgary)
Holy Cross Hospital (Calgary)
Rockyview General Hospital (Calgary)
Bethany Auxiliary Hospital (Camrose)
Drayton Valley General Hospital, Auxiliary and Nursing Home
German Pentecostal Nursing Home (Edmonton)
Misericordia Hospital (Edmonton)
St. Michael's Nursing Home (Edmonton)
University of Alberta Hospitals (Edmonton)
St. Theresa General Hospital (Fort Vermilion)
Grande Prairie General Hospital
High River General Hospital, Auxiliary and Nursing Home
Hythe Municipal Hospital and Nursing Home
Innisfail Health Care Centre
Lac La Biche General Hospital
Lacombe General Hospital
Medicine Hat and District Hospital
Pincher Creek Municipal Hospital
Red Deer Regional Hospital
Rimbey General Hospital
Wainwright and District Health Care Complex
Thorhild-Westlock Auxiliary Hospital (Westlock)

Significant minor construction projects were undertaken at:

Calgary General Hospital
Foothills Provincial General Hospital (Calgary)
Claresholm General Hospital
Charles Camsell Hospital (Edmonton)
Royal Alexandra Hospital (Edmonton)
Cross Cancer Institute (Edmonton)
Grande Cache General Hospital
St. Michael's General Hospital (Lethbridge)
Provost Municipal Health Care Centre
Border Counties General Hospital (Milk River)

Significant extraordinary maintenance projects were carried out at:

Breton General Hospital
Cardston Municipal Hospital
Daysland General Hospital
Drumheller General Hospital
Edmonton General Hospital
Royal Alexandra Hospital (Edmonton)
Palliser Nursing Home (Hanna)
St. Michael's General Hospital (Lethbridge)
Magrath Municipal Hospital
Manning Municipal Hospital
Sturgeon General Hospital (St. Albert)
Immaculata Hospital (Westlock)

Emergency Services

The Emergency Air Ambulance Service transported 2,027 patients at a total cost of $2.4 million during the fiscal year. This is an increase of 10.8 per cent and 33.3 per cent, respectively over the previous fiscal year.

More than 50 per cent of the air ambulance flights within the province (1,149) originated in seven Alberta communities. with Fort McMurray (202), Grande Prairie (192), Medicine Hat (155), Edmonton (153), High Level (122), Peace River (122) and Slave Lake (68) showing the highest utilization. A route map, indicating where five or more air ambulance trips, originating from communities in the province, is shown on page 24.

Communities without hospitals generated 298 air ambulance trips. This is an increase of 24 per cent over the previous fiscal year.

The number of persons transferred out of the province, for hospital and medical care not available in Alberta, increased from 40 to 114 (185 per cent) and costs increased from $74,820 to $227,608 (204 per cent) over the previous fiscal year.

However, there was a decrease in the number and cost of repatriation of Albertans who became ill or were injured outside of the province. The number of patients decreased from 70 in the previous fiscal year to 46 (34 per cent) and costs decreased from $218,574 to $102,297 (53 per cent).

This decrease appears to be a direct result of a change in the air ambulance policy in April 1982. This change limits repatriation to those persons who 1) are not receiving the required level of health care and 2) only when the nearest centre which provides the required level of care is in Alberta.

Institutional Operations

This branch is responsible for direct liaison on management, operational and financial matters between the department and the health care facilities that are the responsibility of the Department of Hospitals and Medical Care.

The branch's main functions include:

- recommending annually the level of financial support provided to each acute care hospital and auxiliary hospital in the province;
- visiting hospitals within the province to ensure that the highest possible standards of care within the scope of the available resources are provided;
- monitoring standards of care in nursing homes in the province;
- providing consulting services to hospitals and nursing homes regarding appropriate standards of patient care, administration, finance, dietetics, pharmacy and physical medicine;
- reviewing periodic financial returns and statistical reports from health care facilities to ensure that operations are being conducted within the approved programs and the financial support provided, plus providing advice leading to corrective action where appropriate;
- reviewing budget reassessment requests and providing detailed recommendations to senior management;
- reviewing and processing requests for ad hoc capital equipment.

In addition to the activities listed, the branch reviewed and provided advice to other department branches on the programming, planning and designing of new institutions and major renovation projects. Institutional Operations staff also actively participated on committees whose mandate had an impact on operations, programs or finances of health care facilities.

The Branch actively participated with the hospital staff of Foothills Provincial General Hospital, Medicine Hat and District Hospital and Drumheller General Hospital, in a pilot funding study conducted by MEDICUS Canada. The purpose of this funding study was to establish, on a pilot basis, a new approach to funding hospital costs on an activity basis. This pilot project will be evaluated over a period of three years with a view to establishing a more appropriate approach to funding hospital operations within the province.

Program Planning

There were 73 capital project requests received in the 1979 and 1981 project request review cycles on which no decision has yet been made. The Program Planning Branch coordinated the continual analysis of these requests, in order that all information was kept current to enable decisions to be made at any time. During the fiscal year, approval was granted and programming initiated on construction projects for:

Crowsnest Pass General Hospital (Blairmore)
Bethany Auxiliary Hospital and Nursing Home (Camrose)
St. Mary's Hospital (Camrose)
Magrath Municipal Hospital
Mayerthorpe General Hospital
Slave Lake General Hospital
Valley General Hospital (Strathmore)

Of the 99 capital construction projects approved to date, 70 have completed the programming stage to the end of this fiscal year. Capital projects for the following hospitals moved into design stage:

Mineral Springs Hospital (Banff)
Bow Island General Hospital
Willow Creek-Claresholm Auxiliary Hospital (Claresholm)
John Neil Hospital (Cold Lake)
Misericordia Hospital (Edmonton)
Lethbridge Regional Hospital
Olds Municipal Hospital
St. Therese General Hospital (St. Paul)
George McDougall Memorial Hospital (Smoky Lake)
Taber General Hospital
St. Mary's Hospital (Trochu)

The Calgary and Edmonton Area Wide Hospital and Nursing Home Bed Need Study, designed to facilitate a coordinated approach to hospital and nursing home bed requirements in these two major urban centres, was completed and a draft final report submitted. Approved Master Development Plans for the Calgary General, Holy Cross (Calgary), Edmonton General and Royal Alexandra (Edmonton) Hospitals were well underway.

Programming work continued on construction projects scheduled at:

Cross Bow Auxiliary Hospital (Calgary)
Glenrose Provincial General Hospital (Edmonton)
Good Samaritan Auxiliary Hospital (Edmonton)
Lloydminster Hospital
McLennan General Hospital and Nursing Home

Sturgeon General Hospital (St. Albert)
Stettler General Hospital
Swan Hills Hospital
Two Hills Municipal Hospital and Nursing Home
Wetaskiwin General Hospital

In 1982 May, the Department of Hospitals and Medical Care acquired responsibility for the continued planning of four coordinated urban hospital projects, two in Edmonton, and two in Calgary. By the end of the fiscal year, design had commenced on the basis of a prototype model.

The development of policy on multi-level care (the provision of care, shelter and/or services to the elderly within one complex) was initiated in conjunction with other government departments.

In 1982/83 the Space Programming Methodology Manual was issued as a supplement to The Planning Process For Capital Projects. This manual outlines a methodology for determining space requirements based on workloads and will be of major assistance to hospitals and consultants involved in capital development projects.

A draft policy was prepared on palliative care in hospitals.

A report entitled "Health Facilities Planning System" was completed by Resources Management Consultants/Stone Maraccini Patterson indicating that development of a computer based heatlh facility planning system is feasible. To test the results of the study, the Department retained DMR and Associates to computerize the space programming module of the system. Systems External Specifications have been completed.

Development of a computerized system to retain an inventory of all existing and new high technology equipment of all active treatment hospitals was initiated.

In 1982-83, the Department of Hospitals and Medical Care obtained jurisdiction for two mental health hospitals, Alberta Hospital Edmonton and Alberta Hospital Ponoka. This necessitated the creation of a team of mental health specialists in the Program Planning Branch, and recruitment was underway by the end of the fiscal year.

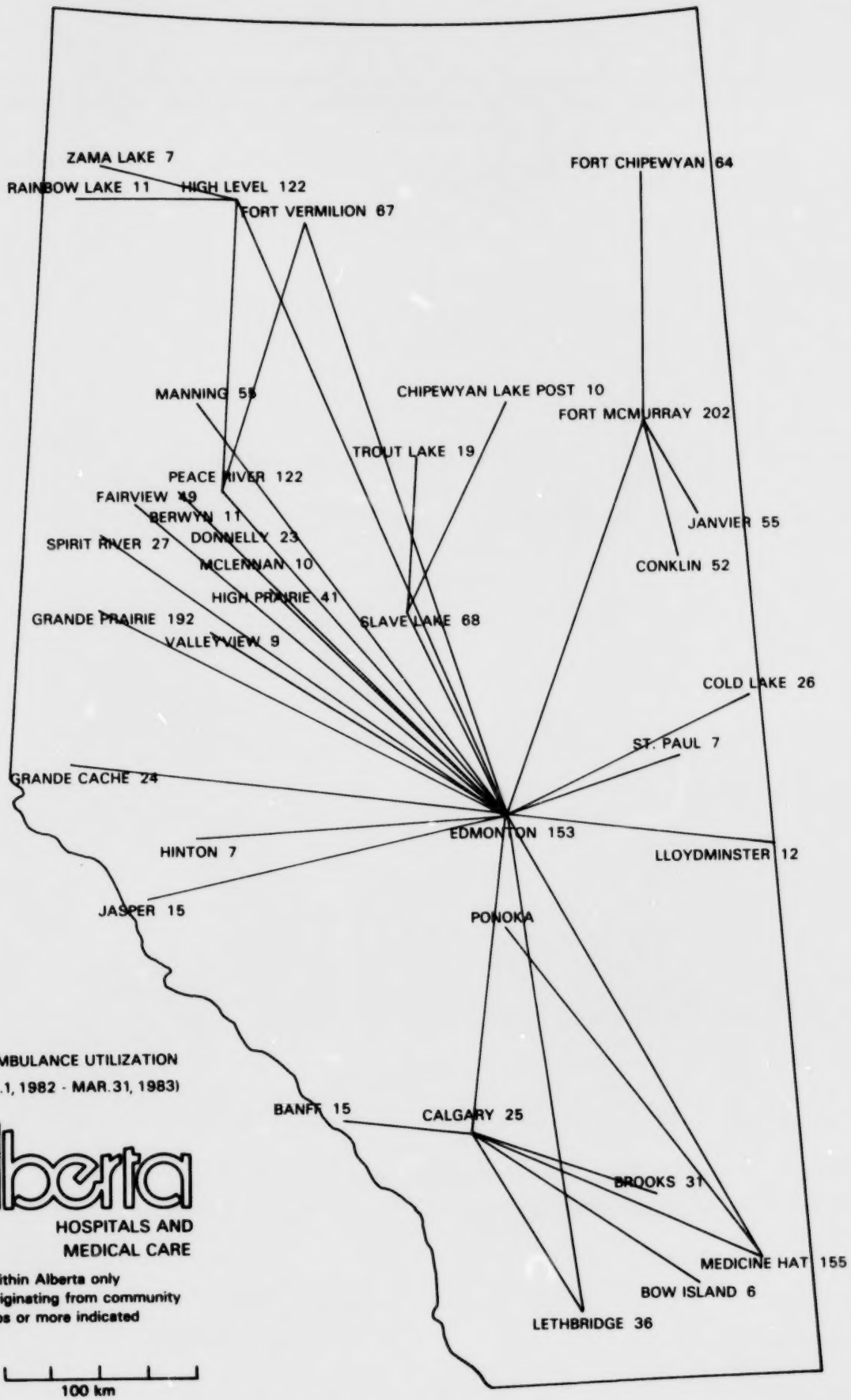
During 1982/83, the Special Programs section of the branch was responsible for the review and approval of projects, staff and equipment associated with diagnostic imaging, laboratory, psychiatric, and critical care programs in active treatment hospitals. Activities of note for the period included:

- actively participating, in conjunction with the College of Physicians and Surgeons, in the on-going hospital laboratory accreditation and imaging facility approval programs.
- participating in federal/provincial committees for the accelerated revision of the laboratory unit measurement system.
- participating in renal, perinatal and hereditary diseases advisory committees.
- development of five-year forecasts for equipment needs in imaging, laboratory and critical care facilities.
- assessment of the "high technology" impact to the fields of diagnostic imaging, laboratory medicine and critical care programs.

In response to requests from hospitals, the Special Programs Section obtained approval for a total of $15 million to replace equipment in the "high technology" services, including radiology, computed tomography, nuclear medicine, ultrasound, laboratory medicine, critical (intensive) care, renal dialysis, oncology and perinatal care. This enabled hospitals to keep pace with technological advances and replace obsolete equipment in a timely manner.

The branch continued to provide:

- advice to the department on policy and planning alternatives and their service cost implications relative to capital and program development in active treatment hospitals, auxiliary hospitals and nursing homes;
- consulting services on mental health programs and gerontological services in active treatment hospitals, auxiliary hospitals and nursing homes.



AIR AMBULANCE UTILIZATION

(APR.1, 1982 - MAR.31, 1983)

Alberta

HOSPITALS AND MEDICAL CARE

1. Trips within Alberta only
2. Trips originating from community
3. Five trips or more indicated

100 km

POLICY DEVELOPMENT DIVISION

The Policy Development Division is responsible for organizing, managing and coordinating research activities, and for developing intermediate and long-term planning and policy options for the department.

Health Economics and Statistics

This branch is responsible for initiating, administering and coordinating policy-oriented research relating to health economics, participating in formulating an assessment of departmental policy in the allocation of health care resources, and providing research and analytical services to other management centers in the department.

It also acts as a focal point for federal-provincial and interprovincial coordination of health economic research and statistical activities required in support of the administration of The Alberta Health Care Insurance Plan, The Alberta Hospitalization Benefits Plan and The Alberta Nursing Home Plan.

The major activities of the branch were as follows:

- prepared and interpreted data for annual fee negotiations with health professionals and assessed financial implications of various options at different negotiation stages;
- developed and implemented, in coordination with respective professional associations, changes to the schedules of benefits payable on a fee-for-service basis;
- prepared revenue and expenditure projections for health care programs for budget purposes;
- identified and analyzed the factors responsible for changes in health care costs and utilization;
- analyzed and estimated the inflation factors for salary and non-salary costs of hospitals and nursing homes;
- assessed and estimated the economic impact of changes in health care regulations;
- reviewed and assessed capital project proposals as submitted to the department by hospital and nursing home boards;
- prepared population estimates by hospital district for utilization studies;
- developed methodologies for the definition and estimation of hospital service areas and service populations;
- prepared statistical tables, charts, graphs and explanatory text for the department's annual reports and statistical supplement.

Management Information Development

This branch is responsible for:

- coordination of long range and operational planning of Institution related EDP Systems;
- development and operation of EDP Systems required to meet the operational needs of the Hospital Services and Policy Development Division of the Department. The Branch provides systems analysis, design and Project management support as well as consulting services in the area of Management Information Systems to Hospitals;
- collection, editing and processing of the information needed for the administration of the Alberta Hospitals and Nursing Homes Acts;
- recommendation of changes and enhancements to existing reporting systems in order to improve the efficiency and quality of the information collected;

- coordination of information requests and advising the systems resources on the availability of the data for retrieval;
- provision of consulting support to hospitals for the submission of project proposals to the Department;
- assistance to Hospitals in systems development by reviewing objectives and plans and by undertaking feasibility studies and post-implementation evaluations;
- assessment of Hospitals EDP budget submissions;
- development of a departmental strategy and policy recommendation for support of EDP systems within hospitals.

Major activities during 1982/83 fiscal year included:

- funding and monitoring of the financial and patient care systems project at the Calgary General Hospital;
- funding and monitoring of the centralized financial systems project at the Alberta Hospital Association;
- funding and monitoring of the patient care system project at the Misericordia Hospital in Edmonton;
- providing EDP consulting and assistance with requirements definition and systems selection for a number of hospitals in the province;
- completing design of the first phase of a major management information system for the department. The system will provide management information needed for the administration and control of hospital costs in the province;
- providing centralized support for the collection, editing and dissemination of institutional information.

Research and Strategic Planning

The primary functions of this branch are to:

- identify and forecast strategic planning issues and needs facing the health care system in the province and analyse and raise these issues for review and discussion by the Management Committee and the Minister;
- take a lead role, based on the discussion of needs and issues facing the health care system, in mapping out intermediate to long range goals for the Department for approval by the Management Committee and the Minister;
- prepare strategic plans and strategies, based on the agreed intermediate and long range goals, for resolving major issues via the development of a long range and intermediate plan and a systematic annual planning- budgetting cycle;
- facilitate the development of broad health policies for the province in consultation with the Minister, the Department and stake-holder groups;
- develop and co-ordinate the departmental response to federal-provincial and inter-provincial issues;
- identify new health care thrusts undertaken by other provinces and countries for reference in Alberta;
- project and analyze health manpower needs for the province and develop strategies for resolving these manpower issues;

- develop an evaluation framework and strategy for evaluating programs and policies of the Department;
- develop and maintain, in conjunction with the library, a registry of all reports/studies undertaken by or on behalf of the Department;
- conduct research and evaluation studies at the request of other branches as part of the support of their planning and management activities.

Major activities during the 1982/83 fiscal year included:

- preparation of discussion papers on nursing manpower for the Nursing Manpower and Education Implementation Committee;
- survey of hospitals and nursing homes as part of the 1983 Health and Social Services Disciplines Committee Survey of Employers;
- participation in the national physician manpower study;
- preparation of briefs for the Health Occupations Board;
- review of proposed legislation related to health professions;
- continuation of further work regarding the transfer of nursing schools from the Department of Hospitals and Medical Care to the Department of Advanced Education;
- preparation of a major study on options related to funding of acute hospitals and in co-operation with the hospitals commenced a base review of the budget of three hospitals proposed as pilots for a new approach to funding;
- preparation of a review of bed ratio planning guidelines and bed need projections;
- participation on a steering committee for the Area Wide Planning Study in conjunction with the Edmonton and Calgary Area Hospital Planning Councils;
- analyses and assessment of funding of health care under Established Program Financing and related health care legislation;
- a survey of Brain Damaged Patients presently located in Alberta institutions;
- preparation of statistics and information on the utilization of provincial mental health care services;
- preparation of inter-provincial comparisons of methods of funding hospital services, the treatment of discretionary funds, and latitude provided to obtain extra revenue;
- coordination of a departmental review on recommendations on the report from the Nursing Home Review Panel.

FINANCIAL STATEMENTS

LIST OF FINANCIAL STATEMENTS

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HOSPITALS AND MEDICAL CARE
STATEMENT OF EXPENDITURE BY PROGRAM AND SUB-PROGRAM
for the year ended March 31, 1983

Program/Sub-program	Funds Provided					Expended	Unexpended (Over Expended)
	Estimates	Prior Year Liabilities	Special Warrants	Transfers	Total Authorized		
Departmental Support Services	$ 31,637,038	$(133,683)	$ 1,550,000	$1,552,000	$ 34,605,355	$ 33,527,441	$ 1,077,914
Health Care Insurance	306,060,000	—	25,408,000	—	331,468,000	331,468,000	—
Financial Assistance for Active Care							
Program Support	122,934,653	—	—	(2,375,000)	120,559,653	120,554,289	5,364
Major Medical Referral and Research Centres	168,867,725	—	22,091,591	—	190,959,316	187,293,186	3,666,130
Major Urban Medical and Referral Centres	311,582,887	—	26,768,130	(3,746,000)	334,605,017	334,044,104	560,913
Other Referral Centres	90,564,657	—	17,973,447	744,338	109,282,442	109,277,417	5,025
Specialized Health Care	133,186,473	—	10,003,087	6,987,662	150,177,222	150,088,150	89,072
Community-Based Hospital Care	171,367,187	—	29,970,210	728,000	202,065,397	203,845,574	(1,780,177)
	998,503,582	—	106,806,465	2,339,000	1,107,649,047	1,105,102,720	2,546,327
Financial Assistance for Long-Term Chronic Care							
Program Support	3,383,824	—	—	(1,365,000)	2,018,824	1,902,220	116,604
Long-Term Chronic Care	112,970,289	—	9,470,071	1,365,000	123,805,360	123,803,118	2,242
Specialized Long-Term Chronic Care	1,357,195	—	1,130,000	—	2,487,195	2,298,469	188,726
	117,711,308	—	10,600,071	—	128,311,379	128,003,807	307,572
Financial Assistance for Supervised Personal Care							
Private Nursing Homes	38,973,606	—	1,149,394	—	40,123,000	39,519,512	603,488
District Nursing Homes	27,413,892	—	4,803,644	—	32,217,536	31,670,297	547,239
Voluntary Nursing Homes	15,544,301	—	251,226	—	15,795,527	14,458,696	1,336,831
	81,931,799	—	6,204,264	—	88,136,063	85,648,505	2,487,558
Financial Assistance for Capital Construction							
Program Support-Capital Construction	18,981,427	—	—	—	18,981,427	12,338,466	6,642,961
Major Medical Referral and Research Centres - Capital Construction	—	—	—	766,459	766,459	741,114	25,345
Major Urban Medical and Referral Centres - Capital Construction	71,852,500	—	—	—	71,852,500	59,232,334	12,620,166
Other Referral Centres - Capital Construction	53,391,700	—	—	—	53,391,700	32,899,004	20,492,696
Specialized Health Care - Capital Construction	6,749,930	—	—	—	6,749,930	458,340	6,291,590
Community-Based Hospital Care - Capital Construction	123,664,100	—	—	(766,459)	122,897,641	102,714,674	20,182,967
Long-Term Chronic Care - Capital Construction	8,280,300	—	—	—	8,280,300	7,612,424	667,876
Supervised Personal Care - Capital Construction	6,408,550	—	—	—	6,408,550	274,896	6,133,654
	289,328,507	—	—	—	289,328,507	216,271,252	73,057,255
Total	$1,825,172,234(a)	$(133,683)(b)	$150,568,800	$3,891,000(c)	$1,979,498,351	$1,900,021,725	$79,476,626

(a) Includes $56,186,382 transferred from Government Services ($5,215,712), Public Works, Supply and Services ($34,800) and Social Services and Community Health ($50,935,870) under authority of the Public Service Administrative Transfers Act.

(b) In accordance with section 32 of the Financial Administration Act, the original estimates have been charged with liabilities of the prior fiscal year to the extent they exceeded the available authority.

(c) Transferred from the salary contingency fund.

STATEMENT B

DISTRIBUTION OF TOTAL EXPENDITURES FOR INSTITUTIONAL CARE BY TYPE OF EXPENDITURE for the year ended March 31, 1983

Expenditure	Institution				Other Support	Total
	Active Care Hospitals	Auxiliary Hospitals	Other Facilities	Nursing Homes		
Operating Support	$ 984,548,431	$123,803,118	$2,298,470	$ —	$ —	$1,110,650,019
Bad Debts	1,762,142	6,576	—	—	—	1,768,718
Equity Interest	471,156	86,741	—	—	—	557,897
Major Equipment Grants	28,353,440	730,877	—	36,538	—	29,120,855
Extraordinary Maintenance	2,801,267	327,610	—	108,657	—	3,237,534
Air Ambulance	—	—	—	—	2,437,312	2,437,312
Blood Service	—	—	—	—	8,424,841	8,424,841
Other Program Support	73,839,926	750,415	—	6,579	2,464,205	77,061,125
Major Capital Construction	202,703,164	7,698,064	—	274,896	—	210,676,124
Other Capital Costs	4,755,947	243,021	—	2,968	593,192	5,595,128
Per Diem Support	—	—	—	85,496,731	—	85,496,731
Total	$1,299,235,473	$133,646,422	$2,298,470	$85,926,369	$13,919,550	$1,535,026,284

DISTRIBUTION OF TOTAL EXPENDITURE BY ACTIVE CARE FACILITY
for the year ended March 31, 1983

STATEMENT C

Institution	Operating Support	Bad Debts	Equity Interest	Major Equipment Grants	Extra-Ordinary Maintenance	Other Program Support	Major Capital Construction	Other Capital Costs	Total
ATHABASCA, Athabasca Municipal	$ 1,752,288	$ 489	$ —	$ 11,438	$ —	$ 42,207	$ 7,807,375	$ —	$ 9,613,797
BANFF, Mineral Springs	2,590,643	28,460	25,271	35,187	35,791	25,056	84,012	—	2,824,420
BARRHEAD, Barrhead General	4,019,835	1,896	—	104,111	—	38,667	1,961	—	4,166,470
BASHAW, Bashaw General	1,172,985	3,304	—	24,718	12,745	6,399	—	—	1,220,151
BASSANO, Bassano General	1,044,669	1,425	—	16,410	51,521	23,484	—	1,950	1,139,459
BEAVERLODGE, Beaverlodge Municipal	1,450,231	4,344	—	16,172	16,364	35,037	—	—	1,522,148
BENTLEY, Bentley General	611,686	31	—	—	—	4,950	128,077	—	744,744
BERWYN, Berwyn Municipal	852,660	474	—	3,967	—	5,856	26,611	—	889,568
BLAIRMORE, Crowsnest Pass General	3,163,266	20,205	—	83,293	—	41,178	31,675	—	3,339,617
BONNYVILLE, St. Louis	2,351,376	9,029	18,289	36,770	—	80,037	716,133	—	3,211,634
BOW ISLAND, Bow Island General	1,457,387	—	—	11,483	1,800	3,834	176,025	—	1,650,529
BOYLE, Boyle General	1,102,250	800	—	12,842	—	42,399	—	—	1,158,291
BRETON, Breton General	1,071,345	727	—	13,550	150,912	15,213	—	—	1,251,747
BROOKS, Brooks Health Centre	4,009,744	12,388	—	237,888	—	63,264	—	183,806	4,507,090
CALGARY, Alberta Children's Provincial General	32,227,274	4,221	—	—	—	1,374,810	746,479	—	34,352,784
CALGARY, Calgary General	80,823,916	275,879	—	2,922,242	38,585	3,899,869	13,405,223	349,727	101,715,441
CALGARY, Colonel Belcher	10,009,516	—	—	333,449	—	90,926	4,083,000	3,934	14,520,825
CALGARY, Foothills Provincial General	71,705,355	171,765	—	2,690,084	170,052	19,292,230	1,096,528	395,484	95,521,498
CALGARY, Holy Cross	40,976,544	175,742	—	1,727,686	41,238	1,826,040	529,791	1,698	45,278,739
CALGARY, N.E. Satellite	—	—	—	—	—	—	1,846,440	—	1,846,440
CALGARY, Rockyview General	20,488,272	—	—	768,470	—	120,876	22,418,189	20,000	43,815,807
CALGARY, S. Satellite	—	—	—	—	—	—	1,868,927	—	1,868,927
CALGARY, Salvation Army Grace	7,764,041	3,898	64,945	279,785	4,965	6,633	74,997	9,50	8,208,771
CAMROSE, St. Mary's	5,449,961	3,105	25,129	137,975	—	35,226	35,379	—	5,686,775
CANMORE, Canmore Municipal	1,334,923	2,861	—	9,494	—	19,836	5,318,890	318,350	7,004,354
CARDSTON, Cardston Municipal	3,282,055	—	—	18,011	64,274	25,248	—	37,749	3,427,337
CARMANGAY, Little Bow Municipal	491,292	—	—	2,860	—	2,037	—	—	496,189
CASTOR, Our Lady of the Rosary	1,102,220	433	10,441	13,540	15,430	13,356	—	—	1,155,420
CEREAL, Cereal Municipal	385,885	—	—	3,694	—	9,663	—	37,646	436,888

STATEMENT C cont'd.

Institution	Operating Support	Bad Debts	Equity Interest	Major Equipment Grants	Extra-Ordinary Maintenance	Other Program Support	Major Capital Construction	Other Capital Costs	Total
CLARESHOLM, Claresholm General	1,864,042	5,136	—	57,520	—	44,230	—	430,258	2,401,186
COALDALE, Coaldale Community	1,027,222	—	7,970	17,905	—	4,335	—	—	1,057,432
COLD LAKE, John Neil	1,728,728	1,358	—	33,899	—	82,254	631,876	—	2,478,115
CONSORT, Consort Municipal	694,062	—	—	4,200	—	9,942	3,995,654	—	4,703,858
CORONATION, Coronation Municipal	952,136	24	—	19,468	—	14,715	5,008,013	—	5,994,356
DAYSLAND, Daysland General	1,756,312	482	—	42,664	280,220	20,229	—	—	2,099,907
DESMARAIS, St. Martin's Health Centre	372,444	—	—	—	—	—	—	—	372,444
DEVON, Devon Civic	687,679	—	—	15,209	—	',218	4,923,568	—	5,633,674
DIDSBURY, Didsbury Municipal	1,495,571	1,031	—	9,983	—	18,117	1,518,702	18,000	3,061,404
DRAYTON VALLEY, Drayton Valley General	2,718,480	3,438	—	23,201	8,474	162,032	11,450,000	—	14,365,625
DRUMHELLER, Drumheller General	4,095,025	—	—	125,242	42,921	24,942	—	—	4,288,130
ECKVILLE, Eckville Municipal	1,203,933	1,086	—	36,987	—	61,988	—	34,341	1,338,335
EDMONTON, Alberta Hospital	36,550,395	—	—	—	—	—	—	—	36,550,395
EDMONTON, Charles Camsell	23,236,140	61,337	—	1,144,246	109,324	439,164	—	11,953	25,002,164
EDMONTON, Edmonton General	38,357,316	160,368	98,465	1,154,448	211,358	2,830,947	57,470	—	42,870,372
EDMONTON, Glenrose Provincial General	23,061,875	2,572	—	214,596	20,308	447,532	383,343	—	24,130,226
EDMONTON, Millwoods Area	—	—	—	—	—	—	3,329,971	—	3,329,971
EDMONTON, Misericordia	37,691,532	36,033	30,619	2,308,136	119,966	2,113,129	9,560,007	128,000	51,987,422
EDMONTON, N.E. Satellite	—	—	—	—	—	—	3,298,761	—	3,298,761
EDMONTON, Royal Alexandra	80,136,120	143,852	—	3,096,905	53,800	9,351,385	287,700	1,244,582	94,224,344
EDMONTON, University of Alberta	115,587,831	262,415	—	2,467,143	9,010	25,171,755	1,851,250	33,353	145,382,757
EDSON, St. John's	1,740,655	1,961	10,491	35,579	7,100	71,922	275,309	—	2,143,017
ELK POINT, Elk Point Municipal	2,082,006	268	—	40,137	—	32,229	—	—	2,154,640
ELNORA, Elnora General	613,694	—	—	—	—	3,114	129,068	—	745,876
EMPRESS, Empress Municipal	478,356	—	—	—	—	2,649	124,664	—	605,669
FAIRVIEW, Fairview General	2,933,504	4,698	—	66,878	—	68,824	—	—	3,073,904
FORT MACLEOD, Macleod Municipal	1,768,909	2,819	—	35,353	—	15,822	61,630	—	1,884,533
FORT MCMURRAY, Fort McMurray Regional	16,142,098	63,886	—	232,074	—	26,197	—	—	16,464,255
FORT SASKATCHEWAN, Fort Saskatchewan General	2,267,520	4,454	—	374,374	3,043	18,903	—	55,926	2,724,220

STATEMENT C cont'd.

Institution	Operating Support	Bad Debts	Equity Interest	Major Equipment Grants	Extra-Ordinary Maintenance	Other Program Support	Major Capital Construction	Other Capital Costs	Total
FORT VERMILION, St. Theresa General	1,424,098	1,387	—	9,967	—	11,496	5,319,137	—	6,766,085
FOX CREEK, Fox Creek	382,039	—	—	—	—	3,792	198,896	—	584,727
GALAHAD, Galahad General	1,094,464	815	—	56,964	—	9,033	—	—	1,161,276
GLENDON, Glendon Municipal	791,470	—	—	—	—	18,652	120,300	—	930,422
GRANDE CACHE, Grande Cache General	1,345,878	12,653	—	32,214	—	21,813	—	125,330	1,537,888
GRANDE PRAIRIE, Grande Prairie General	13,136,172	23,263	—	222,842	—	87,921	22,490,000	—	35,960,198
GRIMSHAW, Grimshaw/Berwyn & District	—	—	—	—	—	—	3,033,154	—	3,033,154
HANNA, Hanna General	1,953,033	1,350	—	150,064	53,442	44,380	—	2,113	2,204,382
HARDISTY, Hardisty General	820,736	233	—	43,994	—	3,945	4,592,204	—	5,461,112
HIGH LEVEL, High Level Community Health Centre	1,427,929	3,127	—	215,911	13,090	49,502	—	—	1,709,559
HIGH PRAIRIE, High Prairie Regional Health Complex	4,164,353	8,128	—	163,415	—	54,975	—	—	4,390,871
HIGH RIVER, High River General	5,369,241	1,783	—	—	—	22,647	1,721,359	—	7,115,030
HINTON, Hinton General	2,655,436	15,392	—	11,668	—	52,107	—	—	2,734,603
HYTHE, Hythe Municipal	592,510	45	—	1,925	—	22,388	4,472,361	—	5,089,229
INNISFAIL, Innisfail Health Care Centre	3,186,815	13,600	—	—	—	24,705	1,298,702	—	4,523,822
ISLAY, Islay Municipal	1,139,016	323	—	3,918	—	22,218	—	—	1,165,475
JASPER, Seton General	1,533,781	82	—	16,035	—	48,048	—	—	1,597,946
KILLAM, Killam General	1,272,879	1,005	5,941	28,687	—	10,866	—	—	1,319,378
LAC LA BICHE, Lac La Biche General	2,897,284	3,330	—	25,578	7,806	123,964	9,667,004	—	12,724,966
LACOMBE, Lacombe General	2,307,435	927	—	271,807	—	46,776	7,353,318	—	9,980,263
LAMONT, Archer Memorial	2,589,459	260	27,131	56,401	16,941	46,774	—	—	2,736,966
LEDUC, Leduc General	2,141,700	4,674	—	22,041	—	34,526	122,407	—	2,325,348
LETHBRIDGE, Lethbridge Regional (General Centre)	13,418,336	2,957	—	856,524	—	44,280	1,651,038	89,311	16,062,446
LETHBRIDGE, Lethbridge Regional Lab.	3,681,315	—	—	88,968	—	—	—	—	3,770,283
LETHBRIDGE, St. Michael's General	11,397,108	7,282	88,231	847,036	438,447	111,685	—	514,592	13,404,381
LLOYDMINSTER, Lloydminster*	2,252,119	—	—	146,994	—	42,648	26,423	—	2,468,184
MAGRATH, Magrath Municipal	897,648	—	—	17,808	56,506	3,228	3,800	—	978,990
MANNING, Manning Municipal	1,399,576	—	—	249,638	63,304	1,998	—	—	1,714,516
MANNVILLE, Mannville Municipal	1,336,728	5,038	—	132,935	—	34,121	—	18,294	1,527,116

Institution	Operating Support	Bad Debts	Equity Interest	Major Equipment Grants	Extra-Ordinary Maintenance	Other Program Support	Major Capital Construction	Other Capital Costs	Total
MAYERTHORPE, Mayerthorpe General	910,903	92	—	30,058	—	55,643	4,000	336	1,001,032
MCLENNAN, Sacred Heart	2,899,139	1,162	—	153,241	—	205,430	91,633	38,099	3,388,704
MEDICINE HAT, Medicine Hat and District (General Centre)	13,323,048	45,359	—	229,205	—	50,466	8,592,018	—	22,240,096
MILK RIVER, Border Counties General	948,188	—	—	35,675	6,730	6,243	—	90,059	1,086,895
MUNDARE, Mary Immaculate	1,175,232	42	5,456	18,174	—	15,594	—	—	1,214,498
MYRNAM, Myrnam Municipal	709,332	389	—	16,452	16,510	11,247	—	—	753,930
OLDS, Olds Municipal	2,009,498	959	—	36,873	7,318	26,250	176,075	—	2,256,973
OYEN, Big Country	1,052,556	547	—	149,710	—	37,935	98,192	—	1,338,940
PEACE RIVER, Peace River Municipal	3,922,054	14,785	—	142,852	—	24,669	—	5,295	4,109,655
PICTURE BUTTE, Picture Butte Municipal	810,816	194	—	37,697	35,000	4,731	—	—	888,438
PINCHER CREEK, Pincher Creek Municipal	2,708,198	787	—	36,420	1,481	26,808	7,661,503	—	10,435,197
PONOKA, Alberta Hospital	21,653,461	—	—	—	—	—	—	—	21,653,461
PONOKA, Ponoka General	2,539,309	797	—	25,973	31,062	23,152	250,624	—	2,870,917
PROVOST, Provost Municipal Health Care Centre	1,874,152	1,173	—	32,649	7,400	75,883	—	101,593	2,092,850
RAYMOND, Raymond Municipal	1,037,656	—	—	14,085	30,936	4,812	2,402,718	—	3,490,207
RED DEER, Red Deer General	34,058,621	43,945	—	258,456	—	409,322	755,948	—	35,526,292
RED DEER, Red Deer Regional Lab.	4,120,719	—	—	—	—	—	—	—	4,120,719
REDWATER, Redwater General	1,507,321	1,182	—	24,373	2,500	34,616	—	—	1,569,992
RIMBEY, Rimbey General	1,467,186	337	—	8,045	—	6,648	87,750	—	1,569,966
ROCKY MOUNTAIN HOUSE, Rocky Mountain House General	3,188,278	4,202	—	—	—	71,840	5,893	—	3,270,213
SLAVE LAKE, Slave Lake General	1,566,192	—	—	45,835	—	48,850	25,065	450	1,686,392
SMOKY LAKE, George McDougall Memorial	1,269,936	885	—	6,990	5,014	13,730	7,900	—	1,304,455
SPIRIT RIVER, Central Peace General	1,810,020	4,561	—	34,473	40,000	23,655	—	8,805	1,921,514
STETTLER, Stettler General	2,845,418	340	—	52,481	15,000	53,604	59,046	—	3,025,889
STONY PLAIN, Stony Plain Municipal	1,746,666	307	—	324,723	20,035	43,911	—	26,181	2,161,823
STRATHMORE, Valley General	92,246	—	—	—	—	—	—	—	92,246
ST. ALBERT, Sturgeon General	7,869,614	6,735	—	54,358	215,650	121,016	64,511	9,159	8,341,043
ST. PAUL, St. Therese General	3,333,264	3,585	—	128,314	16,420	55,914	66,236	—	3,603,733
SUNDRE, Sundre General	1,234,416	820	—	9,612	10,928	27,153	—	—	1,282,929

STATEMENT C cont'd.

Institution	Operating Support	Bad Debts	Equity Interest	Major Equipment Grants	Extra-Ordinary Maintenance	Other Program Support	Major Capital Construction	Other Capital Costs	Total
TABER, Taber General	3,710,916	3,106	—	113,623	—	21,954	412,826	—	4,262,425
THREE HILLS, Three Hills Municipal	980,655	946	—	4,142	—	26,226	2,743,144	—	3,755,113
TOFIELD, Tofield Municipal	1,664,657	2,469	—	31,885	—	11,454	335,980	—	2,046,445
TROCHU, St. Mary's	1,102,716	359	10,104	14,312	—	17,894	65,740	—	1,211,125
TURNER VALLEY, Turner Valley Municipal	888,278	3,522	—	5,717	—	10,158	5,656,006	—	6,563,681
TWO HILLS, Two Hills Municipal	1,556,088	1,247	—	41,596	1,370	33,483	11,862	—	1,645,646
VALLEYVIEW, Valleyview Health Centre	1,885,598	5,039	—	32,495	—	271,326	—	—	2,194,458
VEGREVILLE, St. Joseph's General	3,458,875	2,360	12,727	47,116	17,755	35,434	—	—	3,574,267
VERMILION, Vermilion Health Care Complex	3,238,739	1,419	—	351	—	31,317	150,000	—	3,421,826
VIKING, Viking General	2,019,782	753	—	—	—	23,449	168,103	—	2,212,087
VILNA, Our Lady's	788,352	—	—	—	—	6,030	168,611	—	962,993
VULCAN, Vulcan General	1,154,637	—	—	20,172	—	12,075	2,978,555	—	4,165,439
WAINWRIGHT, Wainwright & District Health Care Complex	2,179,380	5,219	—	25,574	—	79,125	—	—	2,289,298
WESTLOCK, Immaculata	3,495,510	2,903	25,680	131,249	65,885	37,638	—	1,490	3,760,355
WETASKIWIN, Wetaskiwin General	8,246,271	3,555	—	97,147	34,676	26,517	126,322	42,568	8,577,056
WHITECOURT, Whitecourt General	1,931,624	7,947	—	117,069	25,500	52,947	—	1,999	2,137,086
WILLINGDON, Mary Immaculate	863,300	—	4,266	31,571	7,390	12,457	—	—	918,984
Metro-Edmonton Hospital District No. 106	2,324,748	—	—	—	—	—	—	—	2,324,748
Alberta Cancer Board**	28,831,104	1,765	—	1,078,097	67,970	2,464,927	184,102	364,009	32,991,974
Total	$984,548,431	$1,762,142	$471,156	$28,353,440	$2,801,267	$73,839,926	$202,703,164	$4,755,947	$1,299,235,473

* Expenditure to an out-of-province hospital for Alberta residents utilizing the facility.

** Includes funding for: Tom Baker Cancer Centre, Calgary; Cross Cancer Institute, Edmonton; Lethbridge Cancer Clinic and peripheral cancer clinics in Grande Prairie, Medicine Hat, Peace River and Red Deer.

DISTRIBUTION OF TOTAL EXPENDITURE BY AUXILIARY HOSPITAL

STATEMENT D

for the year ended March 31, 1983

Institution	Operating Support	Bad Debts	Equity Interest	Major Equipment Grants	Extra-Ordinary Maintenance	Other Program Support	Major Capital Construction	Other Capital Costs	Total
BROOKS, Brooks	$ 594,477	$ —	$ —	$ 5,886	$ —	$ —	$ —	$ —	$ 600,363
CALGARY, Bethany Care Centre	11,487,924	—	12,932	69,282	—	27,513	—	54,476	11,652,127
CALGARY, Colonel Belcher	4,746,696	—	—	—	—	—	—	—	4,746,696
CALGARY, A.H. & N.H. District #7*	12,770,981	—	—	112,928	143,261	37,062	1,089,665	696	14,154,593
CALGARY, Dr. Vernon Fanning Extended Care	9,569,296	—	—	93,553	—	31,406	—	126,374	9,820,629
CALGARY, Foothills	4,564,730	—	—	—	—	—	—	—	4,564,730
CAMROSE, Bethany	1,508,413	—	8,717	43,147	—	11,184	538,489	—	2,109,950
CARDSTON, Cardston	693,623	—	—	—	—	—	—	—	693,623
CLARESHOLM, Willow Creek - Claresholm	1,393,329	—	—	4,520	—	13,537	47,922	—	1,459,308
DIDSBURY, Mountain View - Kneehill	1,482,281	—	—	27,793	6,776	1,821	—	59,965	1,578,636
DRUMHELLER, J. Cramer	873,201	—	—	10,118	—	2,898	—	—	886,217
EDMONTON, Allen Gray	1,422,663	—	2,388	11,299	111	2,148	—	—	1,438,609
EDMONTON, Dickinsfield Extended Care Centre	6,767,717	—	—	8,619	—	19,362	—	—	6,795,698
EDMONTON, Good Samaritan	5,167,904	—	15,018	43,178	19,396	10,179	95,247	—	5,350,922
EDMONTON & RURAL A.H. & N.H. District #24**	16,183,784	—	—	37,686	12,333	35,997	—	—	16,269,800
EDMONTON, St. Joseph's	5,071,796	—	47,686	48,570	—	7,533	72,440	1,510	5,249,535
EDMONTON, Mewburn Veterans' Centre	3,518,786	—	—	15,750	—	7,650	—	—	3,542,186
EDMONTON, University of Alberta, Aberhart Pavilion	—	—	—	—	—	474,177	—	—	474,177
EDMONTON, Youville Memorial	10,029,864	—	—	—	—	—	—	—	10,029,864
GRANDE PRAIRIE, Grande Prairie	1,362,386	—	—	31,892	—	4,014	—	—	1,398,292
HIGH RIVER, High River	717,286	—	—	—	—	—	—	—	717,286
KILLAM, Flagstaff	1,266,986	—	—	5,250	—	1,149	—	—	1,273,385
LACOMBE, Lacombe Auxiliary	297,196	—	—	2,004	—	1,998	—	—	301,198
LAMONT, Lamont	1,297,224	—	—	16,929	43,272	2,898	—	—	1,360,323
LETHBRIDGE, Lethbridge Regional (Rehab. Centre)	3,101,337	—	—	23,637	—	1,740	—	—	3,126,714
LLOYDMINSTER, Lloydminster	999,768	—	—	20,877	72,463	2,827	—	—	1,095,935
MEDICINE HAT, Medicine Hat & District (Auxiliary Centre)	3,009,900	6,147	—	19,644	—	10,518	—	—	3,046,209
PEACE RIVER, Peace River	1,264,136	—	—	5,250	—	1,998	—	—	1,271,384
RADWAY, Radway Health Care Centre	823,884	—	—	2,100	25,998	8,817	—	—	860,799
RED DEER, Dr. Richard Parsons	3,007,056	—	—	10,488	—	6,750	—	—	3,024,294
RIMBEY, Rimbey	1,373,600	—	—	—	—	1,998	—	—	1,375,598
STETTLER, Dr. A.E. Kennedy	1,414,957	70	—	7,282	—	492	—	—	1,422,801
VEGREVILLE, Vegreville	1,277,958	—	—	10,069	4,000	4,032	—	—	1,296,059
WAINWRIGHT, Wainwright & District Health Care Complex	1,268,982	—	—	10,170	—	3,636	4,641,101	—	5,923,889
WESTLOCK, Thorhild-Westlock	1,180,643	—	—	24,048	—	3,498	1,213,200	—	2,421,389
WETASKIWIN, Wetaskiwin	1,507,191	359	—	5,233	—	1,998	—	—	1,514,781
WHITELAW, Hotel-Dieu of St. Joseph	785,163	—	—	3,675	—	9,585	—	—	798,423
Total	$123,803,118	$6,576	$86,741	$730,877	$327,610	$750,415	$7,698,064	$243,021	$133,646,422

* CALGARY, A.H. & N.H. DISTRICT #7 includes: — Cross Bow — Glenmore Park — Sarcee

** EDMONTON & RURAL, A.H. & N.H. DISTRICT #24 includes: — Grandview Extended Care Centre — Lynnwood Extended Care Centre — Norwood Extended Care Centre

DISTRIBUTION OF TOTAL EXPENDITURE BY NURSING HOME
for the year ended March 31, 1983

STATEMENT E

Nursing Homes	Per Diem Support	Major Equipment Grants	Extraordinary Maintenance	Other Program Support	Major Capital Construction	Other Capital Costs	Total
ATHABASCA, Extendicare	$ 567,136	$ —	$ —	$ —	$ —	$ —	$ 567,136
BARRHEAD, Barrhead	671,953	—	—	—	274,896	—	946,849
BLAIRMORE, Crowsnest Pass	1,062,639	—	—	—	—	—	1,062,639
BONNYVILLE, Extendicare	587,584	—	—	—	—	—	587,584
BROOKS, Health Centre	779,090	6,200	—	—	—	—	785,290
CALGARY, Bethany Care Centre	850,162	—	—	—	—	—	850,162
CALGARY, Beverly	1,942,703	—	—	—	—	—	1,942,703
CALGARY, Bow-Crest	1,651,990	—	—	—	—	—	1,651,990
CALGARY, Bow View	1,678,980	—	—	—	—	—	1,678,980
CALGARY, Brentwood	1,342,289	—	—	—	—	—	1,342,289
CALGARY, Cedars Villa	2,724,449	—	—	—	—	—	2,724,449
CALGARY, Central Park Lodge	1,350,698	—	—	—	—	—	1,350,698
CALGARY, Chinook	1,631,326	—	—	—	—	—	1,631,326
CALGARY, Extendicare	1,073,909	—	—	—	—	—	1,073,909
CALGARY, Father Lacombe	1,100,654	—	—	—	—	—	1,100,654
CALGARY, Forest Grove Care Centre	1,587,520	—	—	—	—	—	1,587,520
CALGARY, George Boyack	2,467,385	—	—	—	—	—	2,467,385
CALGARY, Glamorgan	633,419	—	—	—	—	—	633,419
CALGARY, Mayfair	1,526,273	—	—	—	—	—	1,526,273
CALGARY, Sarcee	829,516	—	—	—	—	—	829,516
CALGARY, Scottish	531,851	—	—	—	—	—	531,851
CALGARY, Southwood	1,312,738	—	—	—	—	—	1,312,738
CAMROSE, Bethany	1,149,240	—	—	—	—	—	1,149,240
CARDSTON, Grandview	450,928	—	—	—	—	—	450,928
CORONATION, Coronation-Paintearth	510,867	—	—	—	—	—	510,867
DIDSBURY, Mountain View - Kneehill	581,585	—	—	—	—	—	581,585
DRUMHELLER, Dr. T. R. Ross Memorial	888,254	—	—	—	—	—	888,254
EDMONTON, Central Park Lodge	1,453,803	—	—	—	—	—	1,453,803
EDMONTON, Dickinsfield Extended Care Centre	1,096,256	—	—	—	—	—	1,096,256

Nursing Homes	Per Diem Support	Major Equipment Grants	Extraordinary Maintenance	Other Program Support	Major Capital Construction	Other Capital Costs	Total
EDMONTON, Dr. Angus McGugan Pavilion	3,069,894	—	—	—	—	—	3,069,894
EDMONTON, Extendicare North	1,324,618	—	—	—	—	—	1,324,618
EDMONTON, Extendicare South	1,075,677	—	—	—	—	—	1,075,677
EDMONTON, Good Samaritan Mount Pleasant Care Centre	2,015,868	—	—	—	—	—	2,015,868
EDMONTON, Good Samaritan (Southgate)	2,508,971	—	—	—	—	—	2,508,971
EDMONTON, Hardisty	2,413,614	—	—	—	—	—	2,413,614
EDMONTON, Jasper Place Central Park Lodge	1,124,130	—	—	—	—	—	1,124,130
EDMONTON, Jubilee Lodge	1,438,156	—	—	—	—	—	1,438,156
EDMONTON, Roger Parker Pavilion	1,617,829	—	6,524	—	—	—	1,624,353
EDMONTON, Venta	743,746	—	—	—	—	—	743,746
EDSON, Edson	912,194	—	—	398	—	—	912,592
FAIRVIEW, Fairview	513,026	—	—	—	—	—	513,026
FORT MACLEOD, Extendicare	532,858	—	—	—	—	—	532,858
FORT SASKATCHEWAN, Rivercrest Lodge	801,684	—	—	—	—	—	801,684
GRANDE PRAIRIE, Central Park Lodge	974,590	—	—	—	—	—	974,590
GRANDE PRAIRIE, Swan Haven	615,361	—	—	—	—	—	615,361
HANNA, Palliser	706,232	—	92,605	—	—	—	798,837
HIGH PRAIRIE, J. B. Wood	624,245	14,303	—	—	—	—	638,548
HIGH RIVER, High River	596,423	—	—	—	—	—	596,423
LACOMBE, Lacombe	526,559	1,862	—	—	—	—	528,421
LAMONT, Lamont	403,727	820	—	—	—	—	404,547
LEDUC, Extendicare	878,345	—	—	—	—	—	878,345
LEDUC, Salem Manor	1,372,738	—	—	—	—	—	1,372,738
LETHBRIDGE, Edith Cavell	1,132,739	—	—	—	—	—	1,132,739
LETHBRIDGE, Extendicare	677,103	—	—	—	—	—	677,103
LETHBRIDGE, Southland	1,718,719	9,295	1,820	—	—	—	1,729,834
LINDEN, Linden	443,272	—	—	—	—	—	443,272
LLOYDMINSTER, Dr. Cooke	732,993	1,905	7,708	—	—	—	742,606
MAYERTHORPE, Extendicare	582,126	—	—	—	—	—	582,126

STATEMENT E cont'd.

Nursing Homes	Per Diem Support	Major Equipment Grants	Extraordinary Maintenance	Other Program Support	Major Capital Construction	Other Capital Costs	Total
MCLENNAN, Our Lady of the Lake	655,675	—	—	—	—	—	655,675
MEDICINE HAT, Central Park Lodge	1,455,438	—	—	—	—	—	1,455,438
MEDICINE HAT, Sunnyside	1,102,555	—	—	—	—	—	1,102,555
PEACE RIVER, Sutherland	780,358	—	—	—	—	—	780,358
PONOKA, Northcott Lodge	802,601	—	—	—	—	—	802,601
PROVOST, Provost Municipal Health Care Centre	714,189	—	—	—	—	—	714,189
RED DEER, Red Deer	1,478,133	—	—	—	—	—	1,478,133
RED DEER, Valley Park Manor	1,228,048	—	—	—	—	—	1,228,048
RED DEER, West Park	956,354	—	—	—	—	—	956,354
ST. ALBERT, Youville	1,811,559	—	—	—	—	—	1,811,559
ST. PAUL, Extendicare	833,422	—	—	—	—	—	833,422
SHERWOOD PARK, Sherwood Park	1,110,247	—	—	—	—	—	1,110,247
SMOKY LAKE, Smoky Lake	480,298	1,193	—	—	—	2,968	484,459
STETTLER, Stettler	849,691	—	—	—	—	—	849,691
STONY PLAIN, Good Samaritan	993,430	—	—	—	—	—	993,430
TWO HILLS, Two Hills Nursing Home District #42	514,698	532	—	—	—	—	515,230
VEGREVILLE, Vegreville	538,188	428	—	—	—	—	538,616
VERMILION, Vermilion Health Care Complex	731,304	—	—	—	—	—	731,304
VIKING, Extendicare	699,660	—	—	—	—	—	699,660
VULCAN, Extendicare	432,337	—	—	—	—	—	432,337
WESTLOCK, Westlock	642,479	—	—	—	—	—	642,479
WETASKIWIN, Wetaskiwin	573,433	—	—	—	—	—	573,433
BONNYVILLE, A.H. & N.H. District #29 Board	—	—	—	2,075	—	—	2,075
LAC ST. ANNE-Whitecourt N.H. District #27 Board	—	—	—	4,106	—	—	4,106
Total	$85,496,731	$36,538	$108,657	$6,579	$274,896	$2,968	$85,926,369

STATEMENT F

DISTRIBUTION OF TOTAL EXPENDITURE BY OTHER FACILITIES
for the year ended March 31, 1983

Other Facilities	Operating Support	Total
BONNYVILLE, Duclos Hospital	$ 843,519	$ 843,519
CARDSTON, Blood Indian Hospital	247,773	247,773
CHATEH, Hay Lake Nursing Station	131,016	131,016
FORT CHIPEWYAN, Fort Chipewyan Nursing Station	97,993	97,993
FOX LAKE, Fox Lake Nursing Station	59,134	59,134
GLEICHEN, Blackfoot Indian Hospital	274,460	274,460
MEDLEY, Canadian Forces Base Hospital	644,575	644,575
Total	$2,298,470	$2,298,470

CAPITAL CONSTRUCTION

STATUS OF CAPITAL CONSTRUCTION PROJECTS
March 31, 1983

Location	Name of Facility	Project	Status of Construction	Total Costs Approved ($000s)
Athabasca	Athabasca Municipal Hospital	Replacement	Construction	14,284
Banff	Mineral Springs Hospital	Replacement and expansion	Design	
Barrhead	Barrhead Nursing Home	Replacement and expansion	Design	
Bentley	Bentley General Hospital	Replacement	Completed	2,377
Black Diamond	Oilfields General Hospital	Replacement and expansion	Construction	12,366
Blairmore	Crowsnest Pass General Hospital	Replacement and expansion	Planning	
Bonnyville	St. Louis Hospital	Replacement and expansion	Design	
Bow Island	Bow Island General Hospital	Addition for medically handicapped	Design	
Calgary	Colonel Belcher Hospital	Upgrading	Construction	8,002
Calgary	Colonel Belcher Hospital	Upgrading	Construction	1,356
Calgary	Cross Bow Auxiliary Hospital	Replacement, expansion and renovations	Planning	
Calgary	District #7	New office building	Construction	2,215
Calgary	Foothills Provincial General Hospital	Repairs	Completed	1,650
Calgary	Calgary General Hospital	Central laundry	Construction	18,958
Calgary	Calgary General Hospital	Upgrading	Construction	4,472
Calgary	Calgary General Hospital	Development of Master Plan	Planning	
Calgary	Holy Cross Hospital	Renovations	Construction	1,260
Calgary	Holy Cross Hospital	Development of Master Plan	Planning	
Calgary	Rockyview General Hospital	Additions and renovations	Construction	126,912
Calgary	Northeast Hospital	New facility	Design	
Calgary	South Hospital*	New facility	Design	
Calgary	Salvation Army Grace Hospital	Renovations	Construction	2,772
Camrose	Bethany Auxiliary Hospital	Upgrading	Completed	523
Camrose	Bethany Auxiliary Hospital	Replacement	Planning	
Camrose	St. Mary's Hospital	Replacement	Planning	
Canmore	Canmore Municipal Hospital	Replacement and expansion	Construction	14,945
Cardston	Cardston Municipal Hospital	Renovations and expansion	Completed	7,477
Claresholm	Willow Creek-Claresholm Auxiliary Hospital	Replacement and expansion	Design	

STATUS OF CAPITAL PROJECTS continued

Location	Name of Facility	Project	Status of Construction	Total Costs Approved ($000s)
Cold Lake	John Neil Hospital	Replacement and expansion	Design	
Consort	Consort Municipal Hospital	Replacement	Construction	8,246
Coronation	Coronation-Paintearth Nursing Home	Upgrading and replacement	Construction	10,524
Devon	Devon Civic Hospital	Replacement	Construction	11,102
Didsbury	Didsbury Municipal Hospital	Replacement	Construction	12,103
Drayton Valley	Drayton Valley General Hospital	Renovations and expansion	Construction	18,529
Edmonton	Dickinsfield Extended Care Centre	Remedial Work	Construction	1,733
Edmonton	Edmonton General Hospital	Renovations	Planning	
Edmonton	Edmonton General Hospital	Development of Master Plan	Planning	
Edmonton	Glenrose Provincial General Hospital	Replacement	Planning	
Edmonton	Good Samaritan Auxiliary Hospital	Replacement	Planning	
Edmonton	Millwoods Hospital	New facility	Design	
Edmonton	Misericordia Hospital	Remedial Program Phase IIA	Completed	8,170
Edmonton	Misericordia Hospital	Remedial Program Phase IIB	Construction	650
Edmonton	Misericordia Hospital	Remedial Program Phase IIIA	Construction	2,860
Edmonton	Misericordia Hospital	Remedial Program Phase IIIB	Construction	7,253
Edmonton	Misericordia Hospital	Remedial Program Phase IVA	Completed	529
Edmonton	Misericordia Hospital	Remedial Program Phase IVB	Construction	3,200
Edmonton	Misericordia Hospital	Renovations - lab	Construction	2,049
Edmonton	Misericordia Hospital	Renovations - admitting	Planning	
Edmonton	Misericordia Hospital	Renovations - obstets	Completed	872
Edmonton	Northeast Hospital*	New facility	Design	
Edmonton	Royal Alexandra Hospital	Master Plan	Planning	
Edmonton	Royal Alexandra Hospital	Parkade, incinerator	Completed	4,761
Edmonton	University of Alberta Hospitals	Solid waste incinerator	Completed	1,884
Elnora	Elnora General Hospital	Replacement	Construction	2,456
Empress	Empress Municipal Hospital	Replacement	Completed	2,556
Fort Macleod	Macleod Municipal Hospital	Replacement and addition	Design	
Fort Vermilion	St. Theresa General Hospital	Replacement	Construction	8,173

STATUS OF CAPITAL PROJECTS continued

Location	Name of Facility	Project	Status of Construction	Total Costs Approved ($000s)
Fox Creek	Fox Creek Hospital	New facility	Completed	2,767
Glendon	Glendon Municipal Hospital	Replacement	Completed	2,497
Grande Prairie	Grande Prairie General Hospital	Renovations and new construction	Construction	100,771
Grimshaw	Grimshaw/Berwyn & District Hospital	New facility (Relocated from Berwyn)	Construction	8,616
Hardisty	Hardisty General Hospital	Replacement	Construction	7,753
High River	High River General Hospital	Replacement and expansion	Completed	14,991
Hythe	Hythe Municipal Hospital	Replacement and expansion	Construction	5,820
Innisfail	Innisfail General Hospital	Replacement	Construction	9,494
Lac La Biche	Lac La Biche General Hospital	Replacement and expansion	Construction	18,714
Lacombe	Lacombe General Hospital	Replacement and addition	Construction	15,888
Leduc	Leduc General Hospital	Renovation and expansion	Design	
Lethbridge	Lethbridge Municipal Hospital	Replacement	Construction	124,164
Lloydminster	Lloydminster Hospital	Replacement	Planning	
Magrath	Magrath Municipal Hospital	Replacement	Design	
Mayerthorpe	Mayerthorpe General Hospital	Replacement	Design	
McLennan	McLennan General Hospital and Nursing Home District	Replacement, addition and renovation	Planning	
Medicine Hat	Medicine Hat and District (General Centre)	Maintenance shop & autopsy	Completed	719
Medicine Hat	Medicine Hat and District (General Centre)	New C.S.B. dietary & nursing tower	Design	
Olds	Olds Municipal Hospital	Replacement	Design	
Oyen	Big Country Hospital	Renovations and addition	Design	
Pincher Creek	Pincher Creek Municipal Hospital	Replacement	Construction	12,400
Ponoka	Ponoka General Hospital	Replacement and addition	Design	
Raymond	Raymond Municipal Hospital	Replacement	Construction	7,711
Red Deer	Red Deer General Hospital	Replacement and renovations	Construction	58,830
Rimbey	Rimbey General Hospital	Renovations and addition	Construction	7,214
Slave Lake	Slave Lake General Hospital	Addition	Planning	
Smoky Lake	George McDougall Memorial Hospital	Replacement	Design	
St. Albert	Sturgeon General Hospital	Expansion and addition	Planning	

STATUS OF CAPITAL PROJECTS continued

Location	Name of Facility	Project	Status of Construction	Total Costs Approved ($000s)
St. Paul	St. Therese General Hospital	Renovations and expansion	Design	
Stettler	Stettler General Hospital	Renovations and replacement	Planning	
Strathmore	Valley General Hospital	New facility	Design	
Swan Hills	Swan Hills Hospital	New facility	Planning	
Taber	Taber General Hospital	Replacement	Design	
Three Hills	Three Hills Municipal Hospital	Replacement	Construction	9,341
Tofield	Tofield Municipal Hospital	Replacement	Design	
Trochu	St. Mary's Hospital	Addition and upgrading	Design	
Two Hills	Two Hills General and Auxiliary Hospital and Nursing Home District	Replacement and expansion	Planning	
Vermilion	Vermilion Municipal Hospital	Replacement	Completed	8,809
Vilna	Our Lady's Hospital	Replacement	Completed	2,819
Vulcan	Vulcan General Hospital	Replacement	Construction	7,897
Wainwright	Wainwright General Hospital	Replacement and renovations	Construction	14,414
Westlock	Thorhild-Westlock Auxiliary Hospital	Expansion and upgrading	Construction	2,361
Wetaskiwin	Wetaskiwin General Hospital	Replacement and renovations	Planning	
	Alberta Heritage Savings and Trust Fund			
Calgary	Alberta Children's Provincial General Hospital	Replacement and expansion and terraced parking	Construction	41,511
Calgary	Southern Alberta Cancer Centre and Specialty Services Facility	New Foothills hospital complex	Construction	95,988
Edmonton	Walter C. Mackenzie Health Sciences Centre	Phase I and II	Construction	449,105

Note: Planning: Covers activities from approval of project request to project scope definition.
Design: Covers activities from project scope definition to call tenders.
Construction: Covers activities from award of tender to completion of construction.
Completion: Readiness for occupancy.

* As at June 1983, design work was suspended on 2 urban hospitals – Calgary South and Edmonton Northeast.

HOSPITALS AND NURSING HOMES OPERATING IN ALBERTA

Alberta
HOSPITALS AND
MEDICAL CARE
MARCH 1983
GENERAL HOSPITAL DISTRICT
GENERAL HOSPITAL
AMBULATORY CARE FACILITY (AC)
FEDERAL NURSING STATION (FN)
Multiple facilities are indicated (2)

HOSPITALS AND NURSING HOMES OPERATING IN ALBERTA

GENERAL HOSPITALS

At March 31, 1983, there were 123 public general hospitals operating in Alberta. This included 122 public general hospitals, which were approved by the Minister of Hospitals and Medical Care and provide standards of service which meet the requirements of The Alberta Hospitals Act, and one contract hospital which the Minister contracts to provide insured services to Alberta residents. Thirteen of these hospitals included long-term care beds.

In addition, there were two federal general hospitals; three federal nursing stations, which provided ambulatory care services only; and two ambulatory care facilities.

The total capacity of all public and federal general hospitals mentioned above was 12,702 adult and children beds. These beds, together with the 3,982 beds in auxiliary hospitals (see Auxiliary Hospitals below) provided a ratio of 7.1 hospital beds per 1,000 population (based on the Statistics Canada Quarterly Estimates of Population for Canada and the Provinces, which put Alberta's population at 2,349,100 as at April 1, 1983).

MENTAL HEALTH HOSPITALS

Effective December 23, 1982, the administration of the two mental health hospitals in Alberta was transferred from the Minister of Social Services and Community Health to the Minister of Hospitals and Medical Care. The total capacity of these two facilities was 1,053 beds as at March 31, 1983.

AUXILIARY HOSPITALS

Auxiliary hospitals are designed and operated for persons who require elements of hospital care at a less intensive level than is provided in general hospitals. The patients are usually chronically ill or disabled. For some, treatment consists of rehabilitation to a point that return to the community or transfer to a nursing home or other residential facility is possible. For others, treatment is the provision of necessary skilled nursing and medical care for an extended period of time, even though there is little prospect of rehabilitation.

There were 38 auxiliary hospitals operating in the province at March 31, 1983, with a total capacity of 3,982 beds. These beds, together with the 417 beds found in long-term care units in public general hospitals, provided a ratio of 1.9 long-term beds per 1,000 population.

NURSING HOMES

Nursing homes provide supervised, personal care for persons who are not ill enough to require hospitalization in a general or auxiliary hospital, but require assistance in coping with activities of daily living. There are three kinds of nursing home ownership in Alberta — private, voluntary and district. Under the Alberta Nursing Home Plan, eligible Alberta residents receive per diem benefits in those homes which are under contract with the Minister of Hospitals and Medical Care to provide care under the terms and provisions of The Nursing Homes Act.

At March 31, 1983, there were 80 nursing homes in the province with a total capacity of 7,340 beds, providing a ratio of 41.7 beds per 1,000 population 65 years of age and older.

For a complete listing of general and auxiliary hospitals in Alberta, and their approved bed complements, refer to Table 3, page 57. A complete list of nursing homes in the province, with their approved bed complements, is shown in Table 5, page 62. Additional data on utilization and staffing for all facilities can be found in the Statistical Tables Section.

STATISTICAL TABLES

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GLOSSARY

GLOSSARY OF TERMS USED IN THE STATISTICAL TABLES 68

HOSPITAL UTILIZATION
SELECTED INDICATORS
For the years ended March 31[1]

	General Hospitals[2]			Auxiliary Hospitals		
	1982	1983	Percentage Change	1982	1983	Percentage Change
Number of Facilities as at March 31	124	125	0.8%	35	38	8.6%
Approved Bed Complement as at March 31[3]						
Adults and Children	12,750	12,702	-0.4%	3,808	3,982	4.6%
Bassinets	1,650	1,632	-1.1%	n.a.	n.a.	n.a.
Approved Bed Complement per 1,000 Population[4,5]	5.5	5.4	-1.8%	1.7	1.7	—
Average Percentage Occupancy[6,7]						
Adults and Children	64.9	70.1	5.2%	88.8	91.5	2.7%
Newborn	40.7	42.4	1.7%	n.a.	n.a.	n.a.
Admissions[8]						
Adults and Children	368,494	405,759	10.1%	2,973	4,220	41.9%
Newborn	43,097	45,083	4.6%	n.a.	n.a.	n.a.
Separations[8]						
Adults and Children	368,264	406,628	10.4%	2,920	3,869	32.5%
Newborn	43,097	45,087	4.6%	n.a.	n.a.	n.a.
Separations per 1,000 Population[4,6,8]	162.1'	174.1	7.4%	1.3	1.7	30.8%
Total Days Stay of Separations[8]						
Adults and Children	2,973,748	3,214,308	8.1%	1,133,214	1,232,315	8.7%
Newborn	242,098	247,080	2.1%	n.a.	n.a.	n.a.
Average Length of Stay[8]						
Adults and Children	8.1	7.9	-2.5%	388.1	318.5	-17.9%
Newborn	5.6	5.5	-1.8%	n.a.	n.a.	n.a.
Patient-Days During The Year[8]						
Adults and Children	3,021,622	3,251,058	7.6%	1,234,588	1,329,715	7.7%
Newborn	245,069	252,861	3.2%	n.a.	n.a.	n.a.
Patient-Days per 1,000 Population[4,6,8]	1,329.6'	1,391.7	4.7%	543.3'	569.2	4.8%
Average Daily Number of Patients[8]						
Adults and Children	8,278.4	8,907.0	7.6%	3,382.4	3,643.1	7.7%
Newborn	671.4	692.8	3.2%	n.a.	n.a.	n.a.
Total Paid Hours[9]	54,457,028[11]	58,337,132[11]	7.1%	7,648,532[13,15]	8,638,217[13,15,17]	12.9%
Full-Time Equivalent Employees[9,10]	26,922.3[11]	28,840.5[11]	7.1%	3,781.3[13,15]	4,270.5[13,15,17]	12.9%
Paid Hours per Patient-Day[4,6,9]	18.0[11,12]	18.0[11,12]	—	5.8[13,16]	6.1[13,18]	5.2%

Notes pertaining to TABLE 1 appear on the following page.

NOTES PERTAINING TO HOSPITAL UTILIZATION SELECTED INDICATORS

For the years ended March 31, 1982 and 1983

NOTES: r: Revised. n.a.: Not applicable.

(1) Source: Annual Return of Health Care Facilities - Hospitals - Part One, 1981-82 and 1982-83. The above information is that reported to the Department by individual hospitals and includes all amendments submitted to the Department on or before April 13, 1983 and January 31, 1984, respectively.

(2) Includes all public and federal general hospitals. Excludes mental health hospitals - Alberta Hospital, Edmonton and Alberta Hospital, Ponoka; and the Blackfoot Health Centre in Gleichen and federal nursing stations which provide ambulatory care services only. Data for the Fox Creek Emergency Health Care Centre and the auxiliary care unit within the Lacombe Nursing Home were consolidated with the Whitecourt General Hospital and the Lacombe General Hospital data, respectively, in 1981-82. Data for the St. Martin's Health Centre in Desmarais were consolidated with the Slave Lake General Hospital data in 1981-82 and 1982-83.

(3) Number of beds, cribs and bassinets that the hospitals were approved to accommodate at March 31, 1982 and 1983, as approved by the Department and Federal Government as at November 16, 1983 and February 24, 1984, respectively.

(4) Adults and Children.

(5) Based on Statistics Canada's Quarterly Estimates of Population for Canada and Provinces, which placed Alberta's population at 2,306,100 and 2,349,100 as at April 1, 1982 and 1983, respectively.

(6) Includes residents and non-residents of Alberta separated from Alberta Hospitals.

(7) Based on total accumulated patient-days during the reporting year and total approved bed complement as at March 31 of the reporting year.

(8) Based on Statistics Canada's Quarterly Estimates of Population for Canada and Provinces, which placed Alberta's population at 2,272,500 and 2,336,000 as at October 1, 1981 and 1982, respectively.

(9) Excludes medical staff, interns and residents.

(10) One full-time equivalent person is equal to total paid hours divided by normal hours of one full-time employee (2,022.75 hours).

(11) Excludes total paid hours for the auxiliary care unit within the Lacombe Nursing Home in 1981-82. Excludes total paid hours for the Medley, Canadian Forces Hospital Cold Lake in 1981-82 and 1982-83.

(12) Excludes patient-days during the year for the Medley, Canadian Forces Hospital Cold Lake (1981-82: 3,781; 1982-83: 3,328).

(13) The Edmonton, Dickinsfield Extended Care Centre is an integrated auxiliary and nursing home care facility consisting of 200 auxiliary care beds and 100 nursing home beds. Although patient data have been separately identified for the auxiliary and nursing home operations in 1981-82 and 1982-83, total staff paid hour data for 1981-82 and 1982-83 cover the combined operation of the facility.

(14) Includes patient-days during the year for nursing home patients within the Dickinsfield Extended Care Centre (i.e., 1981-82: 36,491; 1982-83: 36,448).

(15) The Edmonton, Lynnwood Extended Care Centre is an integrated auxiliary and nursing home care facility consisting of 175 auxiliary care beds and 147 nursing home beds. Although patient data have been separately identified for the auxiliary and nursing home operations in 1981-82 and 1982-83, total staff paid hour data for 1981-82 and 1982-83 cover the combined operation of the facility.

(16) Includes patient-days during the year for nursing home patients within the Lynnwood Extended Care Centre (i.e., 1981-82: 53,545; 1982-83: 53,573).

(17) Excludes total paid hours for the Lacombe Auxiliary Hospital in 1982-83.

(18) Excludes patient-days during the year for the Lacombe Auxiliary Hospital in 1982-83 (i.e., 6,487 patient-days).

Note: The operations of a considerable number of general and auxiliary hospitals in Alberta were affected by a 23 day nursing strike in 1982 (February 16 to March 10, 1982) involving members of the United Nurses of Alberta. The above statistical data for 1981-82 include the effect of this strike.

TABLE 2

DISTRIBUTION OF HOSPITALS, APPROVED BED COMPLEMENT AND AVERAGE PERCENTAGE OCCUPANCY BY TYPE AND SIZE OF HOSPITAL
For the year ended March 31, 1983

Type of Hospital and Size	Hospitals		Approved Bed Complement[1]		Average Percentage Occupancy[2]
	Number	Percentage	Number	Percentage	
PUBLIC GENERAL HOSPITALS[3]					
1 - 24 Beds	19	15.5%	310	2.5%	53.8%
25 - 49 Beds	55	44.7%	1,850	14.6%	59.0%
50 - 99 Beds	27	22.0%	1,765	14.0%	64.3%
100 - 299 Beds	11	8.9%	1,700	13.5%	76.8%
300 Beds and Over	11	8.9%	6,998	55.4%	74.1%
TOTAL	123	100.0%	12,623	100.0%	70.4%
FEDERAL GENERAL HOSPITALS[4]					
1 - 24 Beds	—	—	—	—	—
25 - 49 Beds	1	50.0%	29	36.7%	50.2%
50 - 99 Beds	1	50.0%	50	63.3%	18.2%
100 - 299 Beds	—	—	—	—	—
300 Beds and Over	—	—	—	—	—
TOTAL	2	100.0%	79	100.0%	30.0%
TOTAL GENERAL HOSPITALS	125	n.a.	12,702	n.a.	70.1%
AUXILIARY HOSPITALS					
1 - 49 Beds	7	18.4%	198	5.0%	92.3%
50 - 99 Beds	14	36.9%	705	17.7%	97.3%
100 Beds and Over	17	44.7%	3,079	77.3%	90.1%
TOTAL	38	100.0%	3,982	100.0%	91.5%

NOTES:
n.a.: Not applicable.
(1) Number of adult and children beds and cribs that the hospital was approved to accommodate at March 31, 1983, as approved by the Department and Federal Government as at February 24, 1984.
(2) Based on total accumulated patient-days during 1982-83 and total approved bed complement as at March 31, 1983.
(3) Excludes mental health hospitals – Alberta Hospital, Edmonton and Alberta Hospital, Ponoka; and St. Martin's Health Centre in Desmarais which provides ambulatory care services only.
(4) Excludes Blackfoot Health Care Centre in Gleichen and federal nursing stations which provide ambulatory care services only.

TABLE 3

HOSPITALS BY LOCATION, OWNERSHIP AND APPROVED BED COMPLEMENT at March 31, 1983

Location/Name	Ownership	Approved Bed Complement[1]		
		Adult and Children		Newborn Bassinets
		Acute	Auxiliary	
PUBLIC GENERAL HOSPITALS				
Athabasca Municipal	District	42		5
*Banff, Mineral Springs	Religious	46		10
*Barrhead General	District	83		14
Bashaw General	District	30		7
Bassano General	District	30		7
*Beaverlodge Municipal	District	30		9
*Bentley General	District	10		1
Berwyn Municipal	District	21		5
**Bonnyville, Duclos	Lay Corp.	18		4
*Bonnyville, St. Louis	Religious	60		12
*Bow Island General	District	19	20	3
Boyle General	District	30		7
Breton General	District	30		7
*Brooks Health Centre	District	70		15
*Calgary, Alberta Children's Provincial General	Provincial	128		
*Calgary, Colonel Belcher	District	205	155	
*Calgary, Foothills Provincial General	Provincial	816		87
*Calgary General	Municipal	933		63
*Calgary, Holy Cross	District	532		82
*Calgary, Rockyview General	District	194		
*Calgary, Salvation Army Grace	Religious	100		50
*Camrose, St. Mary's	Religious	117		12
Canmore Municipal	District	20		4
*Cardston Municipal	District	60	30	14
Carmangay, Little Bow Municipal	District	16		1
*Castor, Our Lady of the Rosary	Religious	30		6
Cereal Municipal	District	9		2
*Claresholm General	District	47		9
Coaldale Community	Lay Corp.	25		5
Cold Lake, John Neil	District	45		8
Consort Municipal	District	22		6
Coronation Municipal	District	25		6
Daysland General	District	30		7
Devon Civic	Municipal	12		
*Didsbury Municipal	District	34		11
Drayton Valley General	District	47		8
*Drumheller General	District	70		10
Eckville Municipal	District	26		5
*Edmonton, Charles Camsell	District	365		26
*Edmonton, Cross Cancer Institute	Provincial	76		
*Edmonton General	Religious	589		45
*Edmonton, Glenrose Provincial General	Provincial	309		
*Edmonton, Misericordia	Religious	558		100
*Edmonton, Royal Alexandra	Municipal	933		131
*Edmonton, University of Alberta	Provincial	1,196	40	117

TABLE 3 cont'd.

Location/Name	Ownership	Approved Bed Complement[1]		
		Adult and Children		Newborn Bassinets
		Acute	Auxiliary	
*Edson, St. John's	Religious	50		9
Elk Point Municipal	District	32	10	4
Elnora General	District	16		4
Empress Municipal	District	10		3
Fairview General	District	50		10
Fort Macleod, Macleod Municipal	District	32		11
*Fort McMurray Regional	District	142		24
*Fort Saskatchewan General	District	50		7
Fort Vermilion, St. Theresa General	District	36		5
Fox Creek Hospital	District	10		
Galahad General	District	40		9
Glendon Municipal	District	12		2
Grande Cache General	District	34		7
*Grande Prairie General	District	139		27
*Hanna General	District	50		9
Hardisty General	District	20		6
*High Level Community Health Centre	District	25		10
*High Prairie Regional Health Complex	District	72		16
High River Hospital	District	65		8
*Hinton General	District	40		12
*Hythe Municipal	District	10		3
*Innisfail Health Care Centre	District	35	40	6
Islay Municipal	District	8	20	
*Jasper, Seton General	District	33		8
*Killam General	Religious	30		7
*Lac La Biche General	District	68		14
*Lacombe General	District	50		9
*Lamont, Archer Memorial	Religious	48	24	10
*Leduc General	District	35		8
*Lethbridge Regional (General Centre)	District	206		26
*Lethbridge, St. Michael's General	Religious	202		18
*McLennan, Sacred Heart	District	61		6
*Magrath Municipal	District	26		6
Manning Municipal	District	34		8
Mannville Municipal	District	20	8	3
Mayerthorpe General	District	22		5
*Medicine Hat and District (General Centre)	District	237		23
Milk River, Border Counties General	District	27		7
Mundare, Mary Immaculate	Religious	10	20	
*Municipality of Crowsnest Pass, Crowsnest Pass General	District	60		6
Myrnam Municipal	District	20		8
*Olds Municipal	District	43		6
Oyen, Big Country	District	31		7
*Peace River Municipal	District	71		12
Picture Butte Municipal	District	25		6
*Pincher Creek Municipal	District	44		6
*Ponoka General	District	50		11
Provost Municipal Health Care Centre	District	31		4

TABLE 3 cont'd.

Location/Name	Ownership	Approved Bed Complement[1]		
		Adult and Children		Newborn Bassinets
		Acute	Auxiliary	
*Raymond Municipal	District	25		6
*Red Deer Regional Hospital Centre	District	367		42
*Redwater General	District	32		6
*Rimbey General	District	26		9
*Rocky Mountain House General	District	57	20	8
*St. Albert, Sturgeon General	District	100		17
*St. Paul, St. Therese General	District	75		18
*Slave Lake General	District	39		7
Smoky Lake, George McDougall Memorial	District	25		6
*Spirit River, Central Peace General	District	47		8
*Stettler General	District	50		8
Stony Plain Municipal	District	32		7
*Sundre General	District	34		7
*Taber General	District	66		12
Three Hills Municipal	District	21		8
Tofield Municipal	District	31		9
*Trochu, St. Mary's	Religious	15	15	
Turner Valley Municipal	District	24		6
*Two Hills Municipal	District	37		9
Valleyview Health Centre	District	35		7
*Vegreville, St. Joseph's General	Religious	70		13
*Vermilion Health Care Complex	District	39	15	7
Viking General	District	32		6
Vilna, Our Lady's	District	17		3
*Vulcan General	District	37		7
*Wainwright and District Health Care Complex (General Centre)	District	49		9
*Westlock, Immaculata	Religious	80		11
*Wetaskiwin General	District	135		16
*Whitecourt General	District	34		7
Willingdon, Mary Immaculate	Religious	25	—	6
Total		12,206	417	1,622
FEDERAL GENERAL HOSPITALS				
Cardston, Blood Indian	Federal	29		
*Medley, Canadian Forces Hospital Cold Lake	Federal	50	—	10
Total		79	—	10
MENTAL HEALTH HOSPITALS				
*Edmonton, Alberta Hospital, Edmonton	Provincial	629		
*Ponoka, Alberta Hospital, Ponoka	Provincial	424	—	—
Total		1,053	—	—
AMBULATORY CARE FACILITIES				
Chateh, Hay Lake Nursing Station	Federal			
Desmarais, St. Martin's Health Centre	District			
Fort Chipewyan Nursing Station	Federal			
Fox Lake Nursing Station	Federal			
Gleichen, Blackfoot Health Centre	Federal			

TABLE 3 cont'd.

Location/Name	Ownership	Approved Auxiliary Bed Complement(1)
AUXILIARY HOSPITALS		
*Brooks	District	25
*Calgary, Bethany Care Centre	Religious	425
*Calgary, Cross Bow	District	100
*Calgary, Dr. Vernon Fanning Extended Care Centre	District	300
Calgary Foothills	Provincial	180
*Calgary, Glenmore Park	District	200
*Calgary, Sarcee	District	100
*Camrose, Bethany	Religious	50
*Claresholm, Willow Creek-Claresholm	District	50
*Didsbury, Mountain View-Kneehill	District	50
*Drumheller, J. Cramer	District	30
*Edmonton, Allen Gray	Lay Corp.	52
*Edmonton, Dickinsfield Extended Care Centre	District	200
*Edmonton, Good Samaritan	Religious	200
*Edmonton, Grandview Extended Care Centre	District	200
*Edmonton, Lynnwood Extended Care Centre	District	175
*Edmonton, Norwood Extended Care Centre	District	141
*Edmonton, St. Joseph's Hospital	Religious	198
Edmonton, Youville Memorial Hospital	Religious	210
Edmonton, Veterans' Hospital	Provincial	150
*Grande Prairie	District	53
High River	District	25
*Killam, Flagstaff	District	50
Lacombe	District	18
*Lamont	District	50
*Lethbridge Regional Hospital (Rehabilitation Centre)	District	100
Lloydminster	District	50
*Medicine Hat and District (Auxiliary Centre)	District	100
*Peace River	District	50
Radway Health Care Centre	Municipal	20
*Red Deer, Dr. Richard Parsons	District	100
*Rimbey	District	45
*Stettler, Dr. A.E. Kennedy	District	50
*Vegreville	District	50
*Wainwright and District Health Care Complex (Auxiliary Centre)	District	50
Westlock, Thorhild-Westlock	District	50
*Wetaskiwin	District	50
Whitelaw, Hotel-Dieu of St. Joseph	District	35
Total		3,982

NOTES:

* Indicates that the hospital is accredited by the Canadian Council on Hospital Accreditation.

** Indicates a contract hospital.

(1) Number of beds and bassinets that the hospital was approved to accommodate at March 31, 1983, as approved by the Department and Federal Government as at February 24, 1984.

TABLE 4

NURSING HOME UTILIZATION
SELECTED INDICATORS
For the years ended March 31

	1981	1982[7]	1983	Percentage Change	
				1982/1981	1983/1982
Number of Facilities as at March 31[1]	79[5]	80	80	1.3%	—
Approved Bed Complement as at March 31[2]	7,255[5]	7,286	7,340	0.4%	0.7%
Approved Bed Complement per 1,000 Population 65 Years and Older[2],[3]	44.6[r5]	43.1	41.7	-3.4%	-3.2%
Average Percentage Occupancy[1],[2],[4]	96.5[r6]	98.4	98.9	1.9%	0.5%
Patients Still-In at Beginning of the Year[1]	6,953[r6]	7,091	7,195	2.0%	1.5%
Admissions[1]	2,838[r6]	2,807	2,918	-1.1%	4.0%
Separations[1]	2,700[r6]	2,703	2,832	0.1%	4.8%
Patients Still-In at End of the Year[1]	7,091[r5]	7,195	7,281	1.5%	1.2%
Patient-Days During the Year[1]	2,556,161[r6]	2,616,333	2,649,874	2.4%	1.3%
Total Days Stay of Patients Still-In as at March 31[1]	8,352,902[r5]	8,606,463	8,759,120	3.0%	1.8%
Average Length of Stay of Patients Still-In as at March 31[1]	1,178.0[r5]	1,196.2	1,203.0	1.5%	0.6%

NOTES:

r: Revised.

(1) Compiled on the basis of information reported to the Department by individual nursing homes on or before May 9, 1983.

(2) Number of beds that the nursing homes were approved to accommodate as at March 31 of each reporting year, as approved by the Department and Federal Government as at February 24, 1984.

(3) Based on Statistics Canada's estimate of the population of Alberta and Alberta Bureau of Statistics' estimate of the proportion of the Alberta population 65 years of age and older as at April 1, 1981 to 1983.

(4) Based on total accumulated patient-days during the reporting year and total approved bed complement as at March 31 of the reporting year.

(5) Excludes the Mayfair Nursing Home in Calgary which was closed for fire renovations on September 27, 1980. Temporary arrangements were made to accommodate patients vacated from the Mayfair Nursing Home in selected General Hospitals, Auxiliary Hospitals and Nursing Homes in Calgary. The approved bed complements of the following nursing homes were temporarily increased on September 27, 1980, as reflected in the approved bed complement data as at March 31, 1981: Bow-Crest (+37 beds); Bow View (+18 beds); Brentwood (+5 beds); Cedars Villa (+8 beds); Chinook (+6 beds); Father Lacombe (+4 beds); George Boyack (+3 beds); Southwood (+5 beds).

(6) Includes data for the Mayfair Nursing Home in Calgary for the period from April 1 to September 27, 1980.

(7) Includes the Mayfair Nursing Home in Calgary effective August 1, 1981.

Note: The operations of some nursing homes in Alberta were affected by a 10 day nursing strike in 1980 (April 18 to 27, 1980) and a 23 day nursing strike in 1982 (February 16 to March 10, 1982) involving members of the United Nurses of Alberta. The above statistical data for 1980-81 and 1981-82 include the effects of these strikes.

TABLE 5

NURSING HOMES BY LOCATION, OWNERSHIP AND APPROVED BED COMPLEMENT at March 31, 1983

Location/Name	Ownership	Approved Bed Complement[1]
Athabasca, Extendicare (Alberta) Ltd.	Private	50
Barrhead	District	52
Bonnyville, Extendicare (Alberta) Ltd.	Private	50
*Brooks Health Centre	District	50
*Calgary, Bethany Care Centre	Religious	75
Calgary, Beverly	Private	182
Calgary, Bow-Crest	Private	150
Calgary, Bow View	Private	154
Calgary, Brentwood	Private	120
Calgary, Cedars Villa	Private	248
*Calgary, Central Park Lodge	Private	123
Calgary, Chinook	Private	149
Calgary, Father Lacombe	Religious	100
*Calgary, Forest Grove	Private	150
*Calgary, George Boyack	District	222
Calgary, Glamorgan	Private	55
Calgary, Mayfair	Private	142
Calgary, Extendicare (Alberta) Ltd.	Private	96
*Calgary, Sarcee	District	75
Calgary, Scottish	Private	46
Calgary, Southwood	Private	120
*Camrose, Bethany	Religious	100
Cardston, Grandview	District	40
*Coronation, Coronation-Paintearth	District	33
*Didsbury, Mountain View-Kneehill	District	40
*Drumheller, Dr. T.R. Ross Memorial	District	80
*Edmonton, Central Park Lodge	Private	134
*Edmonton, Dickinsfield Extended Care Centre	District	100
*Edmonton, Dr. Angus McGugan Pavilion	District	225
*Edmonton, Good Samaritan Mount Pleasant Care Centre	Religious	196
*Edmonton, Good Samaritan (Southgate)	Religious	225
Edmonton, Hardisty	Private	226
*Edmonton, Jasper Place Central Park Lodge	Private	100
Edmonton, Jubilee Lodge	Private	128
*Edmonton, Lynnwood Extended Care Centre Roger Parker Pavilion	District	147
Edmonton, Extendicare (Alberta) Ltd. (North)	Private	120
Edmonton, Extendicare (Alberta) Ltd. (South)	Private	95
Edmonton, Venta	Private	65
*Edson	District	50
Fairview	District	40
Fort Macleod, Extendicare (Alberta) Ltd.	Private	50

TABLE 5 cont'd.

Location/Name	Ownership	Approved Bed Complement(1)
Fort Saskatchewan, Rivercrest Lodge	Private	70
Grande Prairie, Central Park Lodge	Private	88
*Grande Prairie, Swan Haven	District	50
*Hanna, Palliser	District	50
*High Prairie, J.B. Wood	District	52
High River	District	50
Lacombe	District	34
*Lamont	District	31
Leduc, Extendicare (Alberta) Ltd.	Private	79
Leduc, Salem Manor	Religious	100
Lethbridge, Edith Cavell	Private	100
Lethbridge, Extendicare (Alberta) Ltd.	Private	59
*Lethbridge, Southland	District	150
Linden	Religious	37
Lloydminster, Dr. Cooke	District	75
*McLennan, Our Lady of the Lake	District	50
Mayerthorpe, Extendicare (Alberta) Ltd.	Private	50
Medicine Hat, Central Park Lodge	Private	130
Medicine Hat, Sunnyside	Religious	100
*Municipality of Crowsnest Pass, Crowsnest Pass	District	66
*Peace River, Sutherland	District	76
Ponoka, Northcott Lodge	Private	70
Provost Municipal Health Care Centre	District	50
*Red Deer	District	118
*Red Deer, Valley Park Manor	District	100
*Red Deer, West Park	District	70
*St. Albert, Youville	Religious	162
St. Paul , Extendicare (Alberta) Ltd.	Private	75
*Sherwood Park	Religious	100
Smoky Lake	District	33
*Stettler	District	50
*Stony Plain, Good Samaritan Care Centre	Religious	90
*Two Hills, Eagle View	District	30
*Vegreville	District	40
Vermilion Health Care Complex	District	50
Viking, Extendicare (Alberta) Ltd.	Private	64
Vulcan, Extendicare (Alberta) Ltd.	Private	36
Westlock	District	52
*Wetaskiwin	District	50
Total		7,340

NOTES:

* Indicates that the nursing home is accredited by the Canadian Council on Hospital Accreditation.

(1) Number of beds that the nursing home was approved to accommodate at March 31, 1983, as approved by the Department as at February 24, 1984.

TABLE 6

CLAIM RECORDS RECEIVED
For the years ended March 31

Claim Records Received From:	Claim Records Received			
	1982		1983	
	Number	%	Number	%
Registrants	93,000	0.44	112,000	0.45
Practitioners	21,224,000	99.56	24,815,000	99.55
TOTAL CLAIM RECORDS	21,317,000	100.00	24,927,000	100.00

Average claim records received per working day: 1982 86,000
1983 100,000

NOTES:

A. Claim records received cover services provided under Basic Health Services, Extended Health Benefits, and Out-Of-Province Hospital Benefits (excluding in-patient claims received under the Reciprocal Billing Agreements with other provinces effective October 1, 1981), as well as practitioner services payable on behalf of the Workers' Compensation Board (effective January 1, 1982).

B. Claim records are counted in terms of line items.

TABLE 7

BASIC HEALTH SERVICES
Persons Covered by Age and Sex
at March 31

Age	Male		Percentage Change	Female		Percentage Change	Total		Percentage Change
	1982	1983		1982	1983		1982	1983	
Under 1	22,497	23,386	3.95%	21,346	22,206	4.03%	43,843	45,592	3.99%
1 - 4	84,819	87,250	2.87%	79,802	82,430	3.29%	164,621	169,680	3.07%
5 - 14	193,711	195,487	0.92%	184,126	185,494	0.74%	377,837	380,981	0.83%
15 - 24	266,831	251,475	-5.75%	251,833	246,087	-2.28%	518,664	497,562	-4.07%
25 - 44	403,988	422,553	4.60%	367,934	386,855	5.14%	771,922	809,408	4.86%
45 - 64	189,451	193,847	2.32%	182,700	187,215	2.47%	372,151	381,062	2.39%
65 & Older	78,977	81,068	2.65%	95,028	98,900	4.07%	174,005	179,968	3.43%
TOTAL	1,240,274	1,255,066	1.19%	1,182,769	1,209,187	2.23%	2,423,043	2,464,253	1.70%

NOTES:

A. The coverage data reported are the actual registrations on the Alberta Health Care Insurance Plan files. These exceed the Statistics Canada provincial population estimates. The differences are accounted for by the Alberta Health Care Insurance Plan files being kept current by the continual processing of additions and deletions of persons, by persons being temporarily outside the province for educational purposes and by registrants who have left the province but retain coverage for a period of three months.

B. The coverage figures do not include members of the Armed Forces and R.C.M.P., and inmates of Federal Penitentiaries.

TABLE 8

AVERAGE FEE-FOR-SERVICE PAYMENTS BY DISCIPLINE
For the years ended March 31

Discipline	Number of Practitioners 1982	1983	Percentage Change	Average Payments 1982	1983	Percentage Change
BASIC HEALTH SERVICES						
A. Medical Practitioners						
TOTAL	2,909	3,071	5.57%	$113,466	$138,457	22.03%
General Practitioners	1,656	1,749	5.62%	92,475	112,055	21.17%
Total Specialists	1,253	1,322	5.51%	141,209	173,386	22.79%
Laboratory Specialists	138	147	6.52%	429,228	543,977	26.73%
Other Specialists	1,115	1,175	5.38%	105,562	127,022	20.33%
SPECIALISTS BY SPECIALTY						
Anaesthetists	127	148	16.54%	85,838	95,844	11.66%
Dermatologists	18	19	5.56%	207,762	247,310	19.04%
General Surgeons	151	153	1.32%	114,062	137,936	20.93%
Urologists	33	33	—	130,624	156,482	19.80%
Internists	235	247	5.11%	91,819	112,864	22.92%
Neurologists	19	20	5.26%	91,138	112,468	23.40%
Neurological Surgeons	12	12	—	108,000	127,928	18.45%
Obstetricians-Gynaecologists	114	117	2.63%	126,408	154,557	22.27%
Ophthalmologists	63	61	-3.17%	142,412	181,763	27.63%
Rhino-Otolaryngologists	29	28	-3.45%	155,577	196,670	26.41%
Orthopaedic Surgeons	62	64	3.23%	124,623	153,054	22.81%
Paediatricians	105	115	9.52%	78,123	97,101	24.29%
Psychiatrists	103	114	10.68%	76,247	88,604	16.21%
Plastic Surgeons	24	24	—	121,597	168,023	38.18%
Physical Medicine & Rehabilitation	8	8	—	44,953	61,477	36.76%
Thoracic Surgeons	12	12	—	163,836	181,066	10.52%
Laboratory/Pathologists	32	37	15.63%	1,314,485	1,538,006	17.00%
Laboratory/Radiologists	99	103	4.04%	169,819	219,526	29.27%
Laboratory/Others	7	7	—	51,117	63,883	24.97%
B. Other Disciplines						
Oral Surgeons	656	750	14.33%	6,407	8,552	33.48%
Chiropractors	285	297	4.21%	54,264	63,149	16.37%
Optometrists	188	193	2.66%	33,289	39,020	17.22%
Podiatrists	15	17	13.33%	119,274	135,917	13.95%
Physiotherapists	118	161	36.44%	19,916	39,201	96.83%
EXTENDED HEALTH BENEFITS						
Dentists	949	1,020	7.48%	10,885	13,073	20.10%
Denturists	127	137	7.87%	30,983	34,802	12.33%
Optometrists	177	177	—	9,052	10,619	17.31%
Ophthalmic Dispensers	163	182	11.66%	8,456	9,287	9.83%

NOTES:

A. The data relating to expenditures for health services are tabulated and reported on a date-of-payment basis. Only fee-for-service payments made to practitioners in Alberta are included.

B. The specialty distribution of medical practitioners is based on their specialty as at the end of the fiscal year.

C. Average payment is the arithmetic mean payment.

D. The statistics in the above table cannot be used as an accurate measure of a full-time doctor's income as:
   (1) doctors receive income from other sources (e.g. Workers' Compensation Board, extra-billing, third party medicals, and for other services not covered by the Plan);
   (2) both full-time and part-time doctors are included in the statistics;
   (3) the figures quoted are gross payments from which doctors pay their office expenses.

E. The amount paid to physiotherapists for the fiscal year 1981-82 includes only fee-for-service payments made during the nine-month period from July 1, 1981 to March 31, 1982.

TABLE 9

AVERAGE GROSS PAYMENTS BY SPECIALTY TO MEDICAL PRACTITIONERS RECEIVING $20,000 OR MORE
For the years ended March 31

	Number of Practitioners 1982	1983	Percentage Change	Average Payments 1982	1983	Percentage Change
All Practitioners	2,447	2,662	8.79%	$ 133,571	$ 158,628	18.76%
(Less Laboratories)	2,350	2,557	8.81%	113,955	133,952	17.55%
General Practitioners	1,377	1,508	9.51%	109,785	128,846	17.36%
Total Specialists	1,070	1,154	7.85%	164,181	197,545	20.32%
Laboratory Specialists	97	105	8.25%	608,791	759,545	24.76%
Other Specialists	973	1,049	7.81%	119,857	141,292	17.88%
SPECIALISTS BY SPECIALTY						
Anaesthetists	120	128	6.67%	90,424	109,687	21.30%
Dermatologists	17	19	11.76%	219,362	247,310	12.74%
General Surgeons	133	139	4.51%	128,525	150,874	17.39%
Urologists	31	31	—	138,880	166,416	19.83%
Internists	192	214	11.46%	110,802	129,115	16.53%
Neurologists	19	20	5.26%	91,138	112,468	23.40%
Neurological Surgeons	10	12	20.00%	127,551	127,928	0.30%
Obstetricians-Gynaecologists	108	111	2.78%	132,894	162,447	22.24%
Ophthalmologists	60	60	—	149,059	184,576	23.83%
Rhino-Otolaryngologists	27	28	3.70%	167,095	196,670	17.70%
Orthopaedic Surgeons	58	59	1.72%	132,532	165,315	24.74%
Paediatricians	77	94	22.08%	103,549	117,073	13.06%
Psychiatrists	83	91	9.64%	92,715	108,499	17.02%
Plastic Surgeons	20	24	20.00%	144,237	168,023	16.49%
Physical Medicine & Rehabilitation	7	8	14.29%	51,334	61,477	19.76%
Thoracic Surgeons	11	11	—	177,573	196,534	10.68%
Laboratory/Pathologists	21	21	—	2,000,815	2,706,844	35.29%
Laboratory/Radiologists	70	77	10.00%	238,474	291,705	22.32%
Laboratory/Others	6	7	16.67%	57,067	63,883	11.94%

NOTES:

A. The data relating to expenditures for health services are tabulated and reported on a date-of-payment basis. Only fee-for-service payments made to practitioners in Alberta are included.

B. The specialty distribution of medical practitioners is based on their specialty as at the end of the fiscal year.

C. Average payment is the arithmetic mean payment.

D. The statistics in the above table cannot be used as an accurate measure of a full-time doctor's income as:

(1) doctors receive income from other sources (e.g. Workers' Compensation Board, extra-billing, third party medicals, and for other services not covered by the Plan);

(2) both full-time and part-time doctors are included in the statistics;

(3) the figures quoted are gross payments from which doctors pay their office expenses.

GLOSSARY

ADMISSION:

Is the official acceptance into a hospital of a patient (including an infant born alive in the hospital) who requires medical and hospital services including room and board. Reception involves the allocation of a hospital bed, bassinet or an incubator to the patient. A person is counted as an admission each time he/she is formally admitted to the hospital or to a provincially recognized unit within the hospital.

ADULTS AND CHILDREN:

All in-patients, except newborn.

AMBULATORY CARE:

A facility specifically designed, staffed and equipped to provide diagnostic and therapeutic services to out-patients.

APPROVED BASSINET COMPLEMENT:

(For Public and Federal General Hospitals) The number of bassinets approved for the hospital by the Department of Hospitals and Medical Care and the Federal Government, respectively.

APPROVED BED COMPLEMENT:

(For Public and Federal General Hospitals) The number of beds approved for the hospital by the Department of Hospitals and Medical Care and the Federal Government, respectively.

AUXILIARY HOSPITAL:

A hospital designed and operated for persons who require elements of hospital care at a less intensive level than is provided in general hospitals. The patients are usually chronically ill or disabled. For some, treatment consists of rehabilitation to a point that return to the community or transfer to a nursing home or other residential facility is possible. For others, treatment is the provision of necessary skilled nursing and medical care for an extended period of time, even though there is little prospect of rehabilitation.

AVERAGE DAILY NUMBER OF PATIENTS:

The average number of in-patients during any given period of time. It is calculated by dividing the number of patient-days during the period, by the number of days in the period.

AVERAGE LENGTH OF STAY:

The average number of days stay of in-patients who were separated from the facility during the reporting year. It is calculated by dividing the total days stay by the number of separations during the reporting year.

AVERAGE PERCENTAGE OCCUPANCY:

The ratio of actual days of care to the maximum days of care for the reporting year, expressed as a percentage. It is computed by dividing the total patient-days during the reporting year by the total bed days in the same year (approved complement at March 31 of the reporting year times the number of days in the year) and multiplying by 100.

CLAIM RECORDS:

Are claims submitted to the Alberta Health Care Insurance Plan, either by practitioners or registrants for the reimbursement of insured services.

DATE-OF-PAYMENT:

Basis on which statistics of payments to practitioners are compiled according to the date when payments are made.

FEDERAL HOSPITAL:

A hospital owned and/or operated by a department or agency of the Government of Canada and operated on a non-profit basis. Operation will generally be by one of the following agencies: Veterans' Affairs, Health and Welfare Canada, National Defence or Atomic Energy of Canada.

FEE-FOR-SERVICE PAYMENT:

Is reimbursement to health care practitioners by the Alberta Health Care Insurance Plan for insured services on behalf of Alberta insured residents on a service basis,

FULL-TIME EQUIVALENT EMPLOYEE:

One full-time equivalent employee is equal to total accumulated paid hours divided by normal hours of one full-time employee (2,022.75 hours).

GENERAL HOSPITAL:

A hospital which provides primarily for the diagnosis and short-term treatment of patients for a wide range of diseases or injuries.

NEWBORN:

An infant born alive in the hospital, or admitted when the mother was admitted for maternity service, is defined as a newborn for the period of his/her continuous stay in the hospital. Transfer within the hospital from the newborn nursery is not considered a separation.

NURSING HOME:

Provides supervised, personal care for persons who are not ill enough to require hospitalization in a general or auxiliary hospital, but require assistance in coping with activities of daily living.

PATIENT-DAYS DURING THE YEAR:

The total volume of in-patient care, expressed in patient-days, of the facility during the reporting year.

PATIENTS STILL-IN AT BEGINNING OF THE YEAR:

Is the count of all patients who were assigned a bed as at 12:01 a.m. on the first day of the reporting year. Includes any patient who was temporarily absent from the facility on this date, but who had not been formally discharged.

PATIENTS STILL-IN AT END OF THE YEAR:

Is the count of all patients who were assigned a bed as at 12:00 p.m. on the last day of the reporting year. Includes any patient who was temporarily absent from the facility on this date, but who had not been formally discharged.

PUBLIC HOSPITAL:

A hospital recognized by the province as a "public hospital". Such a hospital generally is not operated for profit.

REGISTRANT:

A registrant is a person who has registered himself/herself and his/her dependants with the Alberta Health Care Insurance Plan in order to be eligible for benefits under both the Alberta Health Care Insurance Plan and the Alberta Hospitalization Benefits Plan.

SEPARATION:

Is the discharge or death of an in-patient.

TOTAL DAYS STAY:

The accumulated patient-days since admission, of patients separated during the reporting year, even if admitted in a previous year.

TOTAL PAID HOURS:

Are reported separately for each department including those for all full-time, part-time and casual employees excluding medical staff of the hospital who, during the year, have had salaries or wages payable to them by the hospital. Hours covering paid holiday time and other paid leave are included for all categories of personnel.

INVENTORY OF MINISTERIAL ADVISORY COMMITTEES

INVENTORY OF MINISTERIAL ADVISORY COMMITTEES

Alberta Health Facilities Review Committee

The Committee, under the Alberta Health Facilities Review Committee Act, has the power to visit approved hospitals, mental hospitals or institutions, and contract nursing homes or units under the Senior Citizens Housing Act, for purposes of enquiring into the care, treatment, rehabilitation and general attitudes of patients and employees of these institutions. The visits may be made routinely, or on a complaint, or upon the Minister's request.

Members:

Mrs. Catherine Chichak, MLA, CHAIRMAN, (to November 1982)
Mr. Dennis Anderson, MLA, CHAIRMAN, Calgary (from December 1982)
Mrs. Colleen Wood, VICE-CHAIRMAN, Edmonton
Mr. Henry Woo, MLA, Sherwood Park (from January 1983)
Mrs. B. Biddell, Medicine Hat
Mrs. B. McManus, Calgary
Mr. H. Rutkoski, Edmonton
Mrs. L. Clare, Grimshaw
Mr. R. Worden, Midnapore
Mr. E. Andersen, Marwayne
Mr. B. Elliott, Grande Prairie
Mr. W. Edgar, Olds
Mr. K. Taft, Edmonton (to December 1982)
Mr. C. Anderson, MLA, (to November 1982)

Alberta Hereditary Diseases Identification Program Advisory Committee

This Committee acts in an advisory capacity to the Minister of Hospitals and Medical Care and the Minister of Social Services and Community Health in connection with the Alberta Heriditary Diseases Identification Program.

It advises the Ministers on such matters as coordination of the Program on a provincial basis, establishment of standards and monitoring the quality of services, liaison with other related agencies and programs, implementation of screening programs for inherited diseases, methods of providing services, levels of support for the program and on social and ethical matters pertaining to the program.

Members:

Dr. Melville Kerr, CHAIRMAN, representing the Deans of Medicine, University of Alberta, Edmonton and University of Calgary
Dr. Peter Bowen, Director of Northern Alberta Genetics Centre, Edmonton
Dr. R. Brian Lowry, Director, Southern Alberta Genetics Centre, Calgary
Mrs. Barbara Edgecombe-Green, representing Alberta Community Health Nurses Society
Dr. Jeannette MacQuarrie, representing the Society of Alberta Medical Officers of Health
Dr. A. R. Stewart, representing Alberta Medical Association
Dr. John G. Read, representing University of Alberta Hospitals
Mrs. Myrna Linder, representing Alberta Children's Provincial General Hospital, Calgary
Reverend Gordon Hanson, representing public-at-large, nominated by the Minister of Hospitals and Medical Care
Mrs. Linda Redman, representing public-at-large, nominated by the Minister of Hospitals & Medical Care

Non-Voting Members:

Dr. Tom Paton, Alberta Social Services and Community Health
Mr. Klaus Dierich, Alberta Hospitals and Medical Care

Alberta Human Tissue Procurement Task Force

The Task Force reports to the Minister of Hospitals and Medical Care in connection with the planning of more effective means for the procurement and utilization of human organs and tissue for therapeutic purposes, medical education and scientific research in the Province of Alberta.

Members:

Mr. Andrew Little, CHAIRMAN, Calgary
Dr. John Klassen, Foothills Provincial General Hospital
Dr. John Dossetor, University of Alberta Hospitals
Dr. William Lakey, University of Alberta
Dr. D. T. R. Hassard, University of Alberta
Dr. J. C. Butt, Chief Medical Examiner for the Province of Alberta
Dr. Peter Craigie, University of Calgary
Mr. John Dahl, Whitecourt
Miss Joan Nightingale, Alberta Hospitals and Medical Care

The Alberta Medical Association - Alberta Health Care Insurance Plan Liaison Committee

The Liaison Committee shall consider any matters referred to it by either the Alberta Medical Association or the Alberta Health Care Insurance Plan and make recommendations in respect of such matters to the Minister or the Association or both.

Members:

Dr. L. C. Grisdale, CO-CHAIRMAN, Deputy Minister, Alberta Hospitals and Medical Care
Dr. W. E. Mydland, CO-CHAIRMAN, President, Alberta Medical Association
Dr. N. M. Gray, President Elect, Alberta Medical Association
Dr. R. W. Chapman, a member of the general public
Mr. C. Bardell, a member of the general public
Dr. T. A. McPherson, Past President, Alberta Medical Association
Dr. A. V. Follett, Senior Medical Consultant, Alberta Hospitals and Medical Care
Mr. M. J. Ozerkevich, Assistant Deputy Minister, Health Care Insurance Division

Calgary Area Hospital Planning Council

This Council is an advisory body to the Minister. To review proposals for construction, new programs, and changes in present programs submitted to the Government by hospitals, facilities and agencies in the Calgary area and to make recommendations to the Minister.

Members:

Mr. G. W. Braum, CHAIRMAN, representing Bethany Auxiliary Hospital
Mr. George Steber, VICE-CHAIRMAN, Director of Planning, City of Calgary
Mr. George Cornish, Chief Commissioner, City of Calgary
Mr. J. T. McCarthy, representing Foothills Provincial General Hospital
Mr. G. Bondar, representing Metro-Calgary and Rural General Hospital District No. 93
Mr. L. W. Roberts (to January, 1983) representing Calgary General Hospital
Mrs. B. J. Sparrow, (from January 1, 1983) representing Calgary General Hospital
Dr. D. R. Anderson, representing Calgary Medical Society
Mrs. D. Mirosh, representing Calgary Auxiliary and Nursing Home District #7
Captain W. Merritt, representing Salvation Army Grace Hospital
Mr. R. W. Bowser, representing Alberta Children's Provincial General Hospital
Mrs. Drina Barton, representing Public-at-large
Mr. Joseph Richardson, representing Public-at-large
Mr. G. M. McDougall, representing University of Calgary, Health Sciences Centre
Mr. Ralph Klein, Mayor, City of Calgary

Edmonton Area Hospital Planning Council

This Council is an advisory body to the Minister. To review proposals for construction, new programs, and changes in present programs submitted to Government by hospitals, facilities and agencies in the Edmonton area to make recommendations to the Minister.

Members:

Dr. D. F. Cameron, CHAIRMAN, University of Alberta, Health Sciences Centre
Mr. D. H. Sprague, representing University of Alberta Hospitals
Mr. J. E. MacDonald, representing Edmonton General Hospital
Mr. L. Leger, representing Royal Alexandra Hospital
Mr. J. E. Barry, (to September, 1982), representing Misericordia Hospital

Mr. E. F. Barth, (from September, 1982), representing Misericordia Hospital
Mr. L. E. Wilson, representing Glenrose Provincial General Hospital
Mr. E. B. W. Adamson, representing Provincial Hospitals Cancer Board
Mr. R. Throndson, representing Sturgeon General Hospital
Mr. R. Hayter, representing Metro Edmonton Hospital District 106
Mr. W. Lobay, representing Auxiliary Hospital and Nursing Home District 24
Mrs. Marion Johnston, representing non-District Auxiliary Hospitals and Nursing Homes
Mr. L. Mix, representing Edmonton Academy of Business
Mr. G. S. Hughes, representing Public-at-large
Mrs. V. J. Sunohara, representing Public-at-large
Mrs. C. Boodram, representing Public-at-large
Mr. D. Burrows (to February 1983), Board of Commissioners, City of Edmonton
Mr. S. Dietz (from February 1983), Board of Commissioners, City of Edmonton

Emergency Financial Assistance Committee

This Committee considers requests from insured Alberta residents for financial assistance in cases where a resident if referred out of province for specialized hospital and medical care not available in Alberta or where a resident if faced with high expenses arising from emergency treatment while outside the Province. Requests for assistance are considered on the basis of medical necessity and financial hardship for the resident.

Members:

Dr. A. V. Follett, CHAIRMAN, Alberta Hospitals and Medical Care
Dr. W. R. Black, Alberta Medical Association
Mr. R. Morrisette, Alberta Social Services and Community Health
Mr. W. Tudge, Alberta Hospitals and Medical Care

Home Parenteral Nutrition Advisory Committee

This Committee advises the Department of Hospitals and Medical Care on various aspects of the Home Parenteral Nutrition program. It defines program standards and also decides which hospital can provide the program.

Members:

Mrs. Margaret Boyd, CHAIRMAN, Administrative Consultant, Department of Hospitals and Medical Care
Mr. David Bougher, Team Manager, Special Consultants, Department of Hospitals and Medical Care
Dr. Ramsay Attisha, Director, Surgical Teaching Unit, Calgary General Hospital, Associate Professor of Surgery, University of Calgary
Dr. Adrian Jones, Pediatrics Gastroenterologist, Associate Professor, Pediatrics, University of Alberta Hospitals,
Miss Lynn Fester, Consultant Dietician, Department of Hospitals and Medical Care
Mr. Alan Toomey, Patient Care Services Consultant, Department of Hospitals and Medical Care

This committee's mandate has been completed and the committee has been disbanded.

Hospital Privileges Appeal Board

This Board was established to hear appeals from members or former members of the medical staff of approved hospitals who consider themselves aggrieved by a decision of a board of an approved hospital. The Appeal Board has the power to confirm the decision of the board, direct the re-appointment of a former member, direct the reinstatement of a former member, remove or vary the suspension a former member.

Members:

Mr. Frank D. Jones, CHAIRMAN, Dean of Law, University of Alberta, representing the Law Society of Alberta
Mr. George Whitehead, Member of the Public-at-large
Dr. Lorne B. Collins, Physician
Dr. William O. Rothwell, Physician
Mrs. Audrey Thompson, representing Alberta Association of Registered Nurses
Mrs. Virginia Clarke, Member of the Public-at-large
Mr. Theodore A. Bodnar, Member of the Board of an approved hospital

Hospitals and Medical Care Policy Advisory Committee

As an advisory body to the Minister, this Committee is concerned with any of the policies, programs, services or other matters under the administration of the Minister. The objective of the Committee is to provide to the Minister a broadly based advisory structure of citizens and health professionals.

Members:

Mr. Henry Woo, MLA, CHAIRMAN, Sherwood Park
Mrs. Myrna Fyfe, MLA, VICE-CHAIRMAN, St. Albert
Mrs. Carol Snedden, Medicine Hat, representing public-at-large
Dr. Frank Christie, representing College of Physicians and Surgeons
Dr. Paul O. Crossfield, Calgary
Mr. Gordon Hilker, Killam
Mr. Lawrence M. Kelly, Edmonton
Mrs. Jeanette Pick, representing Alberta Association of Registered Nurses
Dr. Bernard Snell, Edmonton, representing Alberta Hospital Association
Dr. C. J. Varvis, Edmonton
Mrs. Winnifred Lesick, (to August, 1982)
Mrs. Doris McFarlane, (from September, 1982), Beaverlodge
Mr. Mark Tennant, (to August, 1982), Calgary
Mr. Harvey Atkinson, (from September, 1982), Morinville

Northern Alberta Spinal Cord Injury Program Advisory Committee

This Committee acts in an advisory capacity to the Minister of Hospitals and Medical Care and the Minister of Social Services and Community Health with reference to key issues related to the establishment and coordination of a spinal cord injury program for the Northern Alberta Region.

Members:

Dr. John Read, ACTING CHAIRMAN, University of Alberta Hospital
Dr. Brian Greenhill, Royal Alexandra Hospital
Dr. Grant McPhail, Glenrose Provincial General Hospital
Dr. Tom Hardin, Workers' Compensation Board
Dr. Peter Allen, Neurosurgeon
Dr. Rubin Feldman, Physical Medicine and Rehabilitation
Dr. David C. Reid, Orthopaedic Surgeon
Mrs. Joyce Baird, Alberta Association of Registered Nurses

Non-voting members:

Mr. George Flynn, Alberta Hospitals and Medical Care
Mr. Blair Richardson, Alberta Social Services and Community Health

Northern and Central Alberta Perinatal Program Advisory Committee

This Committee coordinates the development of the Northern and Central Alberta Perinatal Program on a rational basis as a regional service. It acts in an advisory capacity to Alberta Hospitals and Medical Care to assist in achieving the objectives of the Program. These include optimal patient care and economical utilization of funds.

Members:

Dr. D. F. Cameron, CO-CHAIRMAN, Dean, Faculty of Medicine, University of Alberta
Dr. L. C. Grisdale, CO-CHAIRMAN, Deputy Minister, Alberta Hospitals and Medical Care
Dr. J. G. Read, University of Alberta Hospitals Board
Dr. R. C. Bland, University of Alberta Hospitals Board
Alderman E. Leger, Royal Alexandra Hospital Board
Dr. G. Allin, Royal Alexandra Hospital Board
Dr. D. R. Fraser, University of Alberta
Dr. Doug M. Smith, Alberta Hospital Association
Dr. R. T. Richards, Royal Alexandra Hospital
Dr. D. Schiff, University of Alberta Hospitals
Dr. J. Boyd, University of Alberta Hospitals
Dr. N. Finer, Royal Alexandra Hospital
Dr. J. J. Lipinski, Edmonton General Hospital
Dr. C. Robertson, Glenrose Provincial General Hospital Board
Mr. J. C. Hartley, Glenrose Provincial General Hospital Board
Dr. I. C. Reid, M.L.A., Hinton

Nursing Home Review Committee

The Nursing Home Review Committee hears applications for nursing home contracts from private individuals, corporations, religious organizations and district boards in order to establish that the applications are in accordance with the Nursing Homes Act. The Committee reports and makes recommendations to the Minister with respect to the application.

Members:

Mr. G. S. Wilder, CHAIRMAN, Director, Legislative Research and Planning, Alberta Hospitals and Medical Care
Mr. D. J. Beckley, Director, Program Planning, Alberta Hospitals and Medical Care
Mr. M. H. Lamb, Director, Institutional Operations, Alberta Hospitals and Medical Care
Dr. D. Orn, Co-ordinator, Gerontological Services, Program Planning, Alberta Hospitals and Medical Care
Mr. J. Simon, Director, Accounting and Administrative Services, Alberta Hospitals and Medical Care

Nursing Home Review Panel

This Committee acts in an advisory capacity in connection with any of the policies, programs, services or other matters under the administration of the Minister with particular emphasis on assessing the development of the nursing home system in Alberta, comparing the Alberta nursing home system with those in other provinces and evaluating the structure, functioning and financing of nursing homes in Alberta.

Members:

Dr. Harry Hyde, CHAIRMAN, Edmonton
Mrs. Barbara DeSutter, Calgary
Mr. Sybren Vandermeulen, Edmonton
Mrs. Patricia Weatherup, Lethbridge
Mr. Kevin Taft, Edmonton
Mr. MacGregor Duffield, Innisfail
Sister Jean Golden, Calgary

Renal Program Advisory Committee

The Renal Program Advisory Committee advises Alberta Hospitals and Medical Care on matters relating to renal dialysis and reviews and facilitates the operation of the Regional Dialysis Program.

Members:

Dr. L. C. Grisdale, CHAIRMAN, Deputy Minister, Alberta Hospitals and Medical Care
Dr. D. L. C. Judge, Alberta Medical Association
Dr. R. B. Hans, Calgary Renal Dialysis Regional Centre
Dr. R. Ulan, Edmonton Renal Dialysis Regional Centre
Dr. J. G. Read, University of Alberta Hospitals
Dr. Lorne Klippert, Foothills Provincial General Hospital
Mr. D. Gottesman, Calgary
Mr. Kirkman, Edmonton
Dr. J. B. Dossetor, Department of Medical Nephrology, University of Alberta Hospitals
Dr. H. Mandin, Division of Renal Medicine, Foothills Provincial General Hospital
Dr. Jack Williams, Calgary Renal Dialysis Regional Centre
Dr. W. H. Lakey, Edmonton Renal Dialysis Regional Centre

Non-Voting Member:

Mrs. Anita Yanitsky, Kidney Foundation (Alberta) Edmonton Chapter